## Case 16-30353 Doc 1 Filed 09/23/16 Entered 09/23/16 13:47:40 Desc Main Document Page 1 of 54

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | Chapter 7                     |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself  |  |   |  |
|-----|--|--|---|--|
|     |  | About Debtor 1:                                  | About Debtor 2 (Spouse Only in a Joint Case): |  |
| 1.  | Your full name   |  |   |  |
|     | Write the name that is on your government-issued picture identification (for example, your driver's                              | Brenda<br>First name                             | First name                                    |  |
|     | license or passport).  | Middle name                                      | Middle name                                   |  |
|     | Bring your picture identification to your meeting with the trustee.  | Ramirez Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |  |
| 2.  | All other names you have   | /e   |   |  |
|     | Include your married or maiden names.  |  |   |  |
| 3.  | Only the last 4 digits of<br>your Social Security<br>number or federal<br>Individual Taxpayer<br>Identification number<br>(ITIN) | xxx-xx-9846                                      |   |  |

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Case number (if known)

Debtor 1 Brenda Ramirez

|    |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|---|---|--|
| 4. | Any business names and<br>Employer Identification<br>Numbers (EIN) you have<br>used in the last 8 years | ■ I have not used any business name or EINs.  | ☐ I have not used any business name or EINs.   |
|    | Include trade names and doing business as names   | Business name(s)  | Business name(s)   |
|    |   | EINs  | EINs   |
| 5. | Where you live  |   | If Debtor 2 lives at a different address:  |
|    |   | 5254 W. Roscoe<br>Unit 2<br>Chicago, IL 60641   |  |
|    |   | Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|    |   | Cook<br>County  | County   |
|    |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for  | Check one:  | Check one:   |
|    | bankruptcy  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |   | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |   |   |  |

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Case number (if known) Debtor 1 Brenda Ramirez

| ar  | Tell the Court About   | Your Ba | nkruptcy Ca                      | ase                                  |  |   |    |
|-----|--|---------|----------------------------------|--------------------------------------|--|---|----|
| 7.  | The chapter of the Bankruptcy Code you are   |         |                                  |                                      | of each, see <i>Notice Required by</i> f page 1 and check the appropriat | 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.   |    |
|     | choosing to file under   | ■ Ch    | apter 7                          |                                      |  |   |    |
|     |  | ☐ Ch    | apter 11                         |                                      |  |   |    |
|     |  | ☐ Ch    | apter 12                         |                                      |  |   |    |
|     |  | ☐ Ch    | apter 13                         |                                      |  |   |    |
|     |  |         |                                  |                                      |  |   |    |
| 3.  | How you will pay the fee   | -       | about how yo                     | ou may pay. Typ<br>attorney is subi  | pically, if you are paying the fee yo                                    | k with the clerk's office in your local court for more details burself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with          | ,  |
|     |  |         |                                  |                                      | tallments. If you choose this options (Official Form 103A).              | on, sign and attach the Application for Individuals to Pay  |    |
|     |  |         | I request that<br>but is not req | at my fee be wa<br>uired to, waive y | aived (You may request this option your fee, and may do so only if your  | n only if you are filing for Chapter 7. By law, a judge may,<br>ur income is less than 150% of the official poverty line tha<br>n installments). If you choose this option, you must fill out | at |
|     |  |         |                                  |                                      |  | sial Form 103B) and file it with your petition.   |    |
| 9.  | Have you filed for bankruptcy within the   | ■ No.   |                                  |                                      |  |   |    |
|     | last 8 years?  | ☐ Yes   |                                  |                                      | VA/In a ra   | Coop number   |    |
|     |  |         | District                         |                                      | When<br>When   | Case number   |    |
|     |  |         | District                         |                                      | when   | Case number Case number   | _  |
|     |  |         | District                         |                                      | vviieii  | Case number   |    |
| 10. | Are any bankruptcy   | ■ No    |                                  |                                      |  |   |    |
|     | cases pending or being<br>filed by a spouse who is<br>not filing this case with<br>you, or by a business | ☐ Yes   | S.                               |                                      |  |   |    |
|     | partner, or by an affiliate?   |         |                                  |                                      |  |   |    |
|     | unnate.  |         | Debtor                           |                                      |  | Relationship to you   |    |
|     |  |         | District                         |                                      | When   | Case number, if known   |    |
|     |  |         | Debtor                           |                                      |  | Relationship to you   |    |
|     |  |         | District                         |                                      | When   | Case number, if known   |    |
| 11. | Do you rent your   | □ No.   | Go to I                          | ine 12.                              |  |   |    |
|     | residence?   | Yes     | Has yo                           | our landlord obta                    | ained an eviction judgment agains  | t you and do you want to stay in your residence?  |    |
|     |  |         |                                  | No. Go to line                       | 12.  |   |    |
|     |  |         |                                  | Yes. Fill out In bankruptcy per      |  | Judgment Against You (Form 101A) and file it with this  |    |
|     |  |         |                                  |                                      |  |   |    |

| Deb | otor 1                         | Brenda Ramirez  | 00333       | DUC I      | Document                  | Page 4 of 54  Case number (if known) |  |
|-----|--------------------------------|---|-------------|------------|---------------------------|--------------------------------------|--|
| Par | t 3:                           | Report About Any Bu   | ısinesses ' | You Own as | s a Sole Proprietor       |                                      |  |
| 12. | of ar                          | you a sole proprietor<br>ny full- or part-time<br>ness?   | ■ No.       | Go to Pa   | rt 4.                     |                                      |  |
|     |                                |   | ☐ Yes.      | Name ar    | nd location of business   |                                      |  |
|     | busin<br>an in<br>sepa<br>as a | le proprietorship is a<br>ness you operate as<br>dividual, and is not a<br>rate legal entity such<br>corporation,<br>nership, or LLC. |             |            | business, if any          |                                      |  |
|     | If you                         | , have more than one  |             | Number,    | Street, City, State & ZIP | Code                                 |  |

Check the appropriate box to describe your business:

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?

If you have more than one sole proprietorship, use a separate sheet and attach

it to this petition.

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).

I am not filing under Chapter 11. No.

None of the above

I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No.

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes.

#### Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

| INO. |  |
|------|--|
|      |  |
|      |  |

☐ Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Brenda Ramirez

Case number (if known)

#### Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Brenda Ramirez Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Brenda Ramirez Signature of Debtor 2 Brenda Ramirez Signature of Debtor 1 Executed on September 23, 2016 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Brenda Ramirez

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Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Jason Blust, Law Office of Jason Blust | Date          | September 23, 2016 |
|--|---------------|--------------------|
| Signature of Attorney for Debtor           | _             | MM / DD / YYYY     |
| Jason Blust, Law Office of Jason Blust     |               |                    |
| Law Office of Jason Blust                  |               |                    |
| 211 W Wacker Drive                         |               |                    |
| Ste. 300<br>Chicago, IL 60606              |               |                    |
| Number, Street, City, State & ZIP Code     |               |                    |
| Contact phone (312) 273-5001               | Email address |                    |
| #6276382                                   |               |                    |
| Bar number & State                         |               |                    |

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|                        |                              | Docume            | ent Page 8 of 5 | 4 |                       |
|------------------------|------------------------------|-------------------|-----------------|---|-----------------------|
| Fill in this infor     | mation to identify your      | case:             |                 |   |                       |
| Debtor 1               | Brenda Ramirez<br>First Name | Middle Name       | Last Name       |   |                       |
| Debtor 2               |                              |                   |                 |   |                       |
| (Spouse if, filing)    | First Name                   | Middle Name       | Last Name       |   |                       |
| United States Ba       | ankruptcy Court for the:     | NORTHERN DISTRICT | OF ILLINOIS     |   |                       |
| Case number (if known) |                              |                   |                 |   | ☐ Check if this is an |
|                        |                              |                   |                 |   | amended filing        |
|                        |                              |                   |                 |   | · ·                   |

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

## Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 2,521.00 1c. Copy line 63, Total of all property on Schedule A/B..... 2,521.00 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 0.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 11,735.00 Your total liabilities \$ 11.735.00 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 2,663.00 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 2,655.00 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have?

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

4,638.04

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Port A on Cohodula E/E compthe followings   | Total clair | n    |
|--|-------------|------|
| From Part 4 on Schedule E/F, copy the following:   |             |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$          | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$          | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$          | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$          | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$          | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$         | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$          | 0.00 |

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| Fill in this infor  | rmation to identify your   | r case and this filing:  |   |   |
|---|--|--|---|---|
| Debtor 1  | Brenda Ramirez   |  |   |   |
|   | First Name   | Middle Name  | Last Name   |   |
| Debtor 2<br>(Spouse, if filing)   | First Name   | Middle Name  | Last Name   |   |
|   |  | NODELIEDN DIOTDIOT OF  | - 11.1 NO.10  |   |
| United States B   | ankruptcy Court for the:   | NORTHERN DISTRICT OF   | - ILLINOIS  |   |
| Case number   |  |  |   | ☐ Check if this is an                                       |
|   |  |  |   | amended filing  |
|   |  |  |   |   |
| Official Ed   | orm 106A/B   |  |   |   |
|   |  | 4  |   |   |
| Schedu  | le A/B: Prop   | perty  |   | 12/15   |
| think it fits best. I<br>information. If mo<br>Answer every que   | Be as complete and accur<br>ore space is needed, attach<br>estion.   | ate as possible. If two married<br>n a separate sheet to this form.  | ce. If an asset fits in more than one category, list the people are filing together, both are equally response On the top of any additional pages, write your name of the course of the | sible for supplying correct                                 |
| Part 1. Describe  | e Each Residence, Buildin  | g, Land, or Other Real Estate Y  | ou Own or have an interest in   |   |
| 1. Do you own or  | have any legal or equitab  | le interest in any residence, bu   | ilding, land, or similar property?  |   |
| ■ No. Go to Pa  | art 2  |  |   |   |
| _   | is the property?   |  |   |   |
|   | is the property:   |  |   |   |
| □ res. Where  |  |  |   |   |
|   | e Your Vehicles  |  |   |   |
| Part 2: Describe  | ase, or have legal or eq   |  | cles, whether they are registered or not? Include G: Executory Contracts and Unexpired Leases   |   |
| Part 2: Describe  Do you own, leasomeone else dr  | ase, or have legal or eq<br>rives. If you lease a vehic  |  | e G: Executory Contracts and Unexpired Leases   |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr   | ase, or have legal or eq<br>rives. If you lease a vehic  | cle, also report it on Schedule  | e G: Executory Contracts and Unexpired Leases   |   |
| Do you own, leasomeone else dr 3. Cars, vans, to  | ase, or have legal or eq<br>rives. If you lease a vehic  | cle, also report it on Schedule  | e G: Executory Contracts and Unexpired Leases   |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr   | ase, or have legal or eq<br>rives. If you lease a vehic  | cle, also report it on Schedule  | e G: Executory Contracts and Unexpired Leases   |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  No Yes  4. Watercraft, a   | ase, or have legal or eq<br>rives. If you lease a vehic<br>rucks, tractors, sport u  | cle, also report it on Schedule stility vehicles, motorcycles ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases   |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  ■ No □ Yes  4. Watercraft, a  Examples: Bost   | ase, or have legal or eq<br>rives. If you lease a vehic<br>rucks, tractors, sport u  | cle, also report it on Schedule stility vehicles, motorcycles ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  I vehicles, other vehicles, and accessories  |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  ■ No □ Yes  4. Watercraft, a  Examples: Boa ■ No   | ase, or have legal or eq<br>rives. If you lease a vehic<br>rucks, tractors, sport u  | cle, also report it on Schedule stility vehicles, motorcycles ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  I vehicles, other vehicles, and accessories  |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  ■ No □ Yes  4. Watercraft, a  Examples: Bost   | ase, or have legal or eq<br>rives. If you lease a vehic<br>rucks, tractors, sport u  | cle, also report it on Schedule stility vehicles, motorcycles ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  I vehicles, other vehicles, and accessories  |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  ■ No □ Yes  4. Watercraft, a  Examples: Boa ■ No   | ase, or have legal or eq<br>rives. If you lease a vehic<br>rucks, tractors, sport u  | cle, also report it on Schedule stility vehicles, motorcycles ATVs and other recreationa   | e G: Executory Contracts and Unexpired Leases  I vehicles, other vehicles, and accessories  |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  No  Yes  4. Watercraft, a  Examples: Box  No  Yes  | ase, or have legal or equives. If you lease a vehice rucks, tractors, sport unircraft, motor homes, A ats, trailers, motors, personals, trailers, motors, personals.   | cite, also report it on Schedule at ility vehicles, motorcycles at ility vehicles, motorcycles and other recreational watercraft, fishing vesses you own for all of your ent | e G: Executory Contracts and Unexpired Leases  I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories   |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  No  Yes  4. Watercraft, a  Examples: Box  No  Yes  | ase, or have legal or equives. If you lease a vehice rucks, tractors, sport unircraft, motor homes, A ats, trailers, motors, personals, trailers, motors, personals.   | cite, also report it on Schedule at ility vehicles, motorcycles at ility vehicles, motorcycles and other recreational watercraft, fishing vesses you own for all of your ent | e G: Executory Contracts and Unexpired Leases  I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories   |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  No Yes  4. Watercraft, a  Examples: Bos No Yes  5 Add the doll pages you h   | ase, or have legal or equives. If you lease a vehice rucks, tractors, sport unircraft, motor homes, A ats, trailers, motors, personate value of the portion have attached for Part 2   | ATVs and other recreational sonal watercraft, fishing vessel you own for all of your enter   | e G: Executory Contracts and Unexpired Leases  I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories   |   |
| Do you own, leasomeone else dr 3. Cars, vans, tr No Yes  4. Watercraft, a Examples: Bos No Yes  5 Add the doll pages you h  | ase, or have legal or equives. If you lease a vehice rucks, tractors, sport unircraft, motor homes, A ats, trailers, motors, personal and House Your Personal and House  | ATVs and other recreational sonal watercraft, fishing vessel you own for all of your enter   | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories  |   |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  No  Yes  4. Watercraft, a  Examples: Box  No  Yes  5 Add the doll  pages you h  Part 3: Describe  Do you own or                                  | ase, or have legal or equives. If you lease a vehice rucks, tractors, sport under the portion are attached for Part 2 at Your Personal and House have any legal or equivalence.  | ATVs and other recreational sonal watercraft, fishing vessel you own for all of your enter   | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories  | . \$0.00  |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  No  Yes  4. Watercraft, a  Examples: Box  No  Yes  5 Add the doll  pages you h  Part 3: Describe  Do you own or  6. Household g                  | ase, or have legal or equives. If you lease a vehice rucks, tractors, sport universally attached for Part 2 attached for Part 2 attached for Part 2 attached for Part 2 attached for equivalence and legal or equivalence appliances, furniture goods and furnishings lajor appliances, furniture  | ATVs and other recreational sonal watercraft, fishing vessel you own for all of your enter   | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories  | Current value of the portion you own? Do not deduct secured |
| Part 2: Describe  Do you own, leasomeone else dr  3. Cars, vans, tr  No  Yes  4. Watercraft, a  Examples: Box  No  Yes  5 Add the doll  pages you h  Part 3: Describe  Do you own or  6. Household g  Examples: M  No | ase, or have legal or equives. If you lease a vehice rucks, tractors, sport universal, tractors, sport universal, trailers, motors, personal and House attached for Part 2 and P | ATVs and other recreational watercraft, fishing vesses. Write that number here   | I vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories ries from Part 2, including any entries for  | Current value of the portion you own? Do not deduct secured |

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Case 16-30353 Doc 1 Filed 09/23/16 Entered 09/23/16 13:47:40 Desc Main Document Page 11 of 54 Debtor 1 Brenda Ramirez Case number (if known) \$500.00 TV, laptop 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... Personal Used Clothing \$650.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... Miscellaneous costume jewelry \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,500.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes.....

Official Form 106A/B Schedule A/B: Property

\$13.00

Cash on hand:

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Case number (if known) Document Debtor 1 Brenda Ramirez 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No ■ Yes..... 17.1. Checking account with Bank of America \$3.00 Checking account with Chase \$5.00 17.2. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

27. Licenses, franchises, and other general intangibles

☐ Yes. Give specific information about them...

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

■ No

| Debtor 1                  | Case 16-30353 DOC 1 Brenda Ramirez   | Document                    | Page 13 of 54  Case number (if known)                   | Desc Main   |
|---------------------------|--|-----------------------------|---|---|
| _                         | Give specific information about them   |                             |   |   |
|                           | property owed to you?  |                             |   | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax ref               | funds owed to you  |                             |   | ·   |
| ■ No<br>□ Yes.            | Give specific information about them, i  | ncluding whether you alre   | ady filed the returns and the tax years                 |   |
| ■ No                      |  | ousal support, child supp   | ort, maintenance, divorce settlement, property          | settlement  |
| Examµ<br>■ No             | amounts someone owes you  oles: Unpaid wages, disability insurance  benefits; unpaid loans you made t  Give specific information |                             | efits, sick pay, vacation pay, workers' comper          | esation, Social Security  |
|                           | sts in insurance policies<br>bles: Health, disability, or life insurance   | ; health savings account (  | HSA); credit, homeowner's, or renter's insuran          | ce  |
| ■ Yes.                    | Name the insurance company of each<br>Company name   |                             | Beneficiary:  | Surrender or refund value:  |
|                           | Employer - Te<br>surrender valu  | rm Life Insurance - no<br>e | cash  | \$0.00  |
| If you a some of          | terest in property that is due you from are the beneficiary of a living trust, expense has died.  Give specific information      |                             | ed<br>surance policy, or are currently entitled to rece | ive property because  |
| Exam <sub>l</sub><br>■ No | against third parties, whether or no ples: Accidents, employment disputes, in Describe each claim                                |                             |   |   |
| ■ No                      | contingent and unliquidated claims of Describe each claim  | of every nature, includin   | g counterclaims of the debtor and rights to             | set off claims  |
| 35. <b>Any fir</b> No     | nancial assets you did not already lis   | st                          |   |   |
| ☐ Yes.                    | Give specific information  |                             |   |   |
| 36. Add t                 | the dollar value of all of your entries  | ,                           | ny entries for pages you have attached                  | \$21.00   |
| 36. Add t<br>for Pa       | the dollar value of all of your entries  |                             |   | \$21.00   |

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 Brenda Ramirez

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$2,500.00 Part 4: Total financial assets, line 36 \$21.00 Part 5: Total business-related property, line 45 \$0.00

\$0.00

\$0.00

\$2,521.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

Part 6: Total farm- and fishing-related property, line 52

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,521.00

\$2,521.00

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| Fill in this infor  | mation to identify your  | case:             |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Debtor 1            | Brenda Ramirez           |                   |             |  |
|                     | First Name               | Middle Name       | Last Name   |  |
| Debtor 2            |                          |                   |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |
|                     |                          |                   |             |  |

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the<br>portion you own | Amount of the exemption you claim Specific laws that allow exemption | n |
|--|---|--|---|
|  | Copy the value from<br>Schedule A/B     | Check only one box for each exemption.                               |   |
| Miscellaneous used household goods Line from Schedule A/B: 6.1                         | \$1,200.00                              | \$1,200.00 735 ILCS 5/12-1001(b)                                     |   |
| Ellie Holli Gonedale 7V2. G. 1   |   | □ 100% of fair market value, up to any applicable statutory limit    |   |
| TV, laptop Line from Schedule A/B: 7.1   | \$500.00                                | \$500.00 735 ILCS 5/12-1001(b)                                       |   |
| Line nom Schedule A.B. 1.1   |   | □ 100% of fair market value, up to any applicable statutory limit    |   |
| Personal Used Clothing Line from Schedule A/B: 11.1                                    | \$650.00                                | \$650.00 735 ILCS 5/12-1001(a)                                       |   |
| Elle IIolii ochedale A/B. 11.1   |   | □ 100% of fair market value, up to any applicable statutory limit    |   |
| Miscellaneous costume jewelry Line from Schedule A/B: 12.1                             | \$150.00                                | \$150.00 735 ILCS 5/12-1001(b)                                       |   |
| Line Holli Schedule A/B. 12.1  |   | □ 100% of fair market value, up to any applicable statutory limit    |   |
| Cash on hand: Line from Schedule A/B: 16.1   | \$13.00                                 | \$13.00 735 ILCS 5/12-1001(b)  |   |
| Life from Schedule A/B. 10.1   |   | □ 100% of fair market value, up to any applicable statutory limit    |   |

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Case number (if known)

| ef description of the property and line on nedule A/B that lists this property | Current value of the portion you own   | ······································  |  | Specific laws that allow exemption   |
|--|--|---|--|--|
|  | Copy the value from<br>Schedule A/B  | Che   | ck only one box for each exemption.  |  |
| ecking account with Bank of America e from Schedule A/B: 17.1                  | \$3.00   |   | \$3.00   | 735 ILCS 5/12-1001(b)  |
|  |  |   | 100% of fair market value, up to any applicable statutory limit  |  |
| ecking account with Chase  | \$5.00   | •   | \$5.00   | 735 ILCS 5/12-1001(b)  |
| e IIOIII <i>Scriedule AVD</i> . 17.2   |  |   | 100% of fair market value, up to any applicable statutory limit  |  |
| bject to adjustment on 4/01/19 and every 3<br>No                               | 3 years after that for ca  | ses fi  | ,  | ,  |
|  | ecking account with Bank of America e from Schedule A/B: 17.1  ecking account with Chase e from Schedule A/B: 17.2  expou claiming a homestead exemption object to adjustment on 4/01/19 and every 3 No  Yes. Did you acquire the property covered | ecking account with Bank of America e from Schedule A/B: 17.1  ecking account with Chase e from Schedule A/B: 17.2  expou claiming a homestead exemption of more than \$160,379 and every 3 years after that for call No  Yes. Did you acquire the property covered by the exemption with a specific point of the property covered by the exemption with the second seco | ecking account with Bank of America e from Schedule A/B: 17.1  ecking account with Chase e from Schedule A/B: 17.2  expou claiming a homestead exemption of more than \$160,375? Abject to adjustment on 4/01/19 and every 3 years after that for cases find No  Yes. Did you acquire the property covered by the exemption within 1 | portion you own Copy the value from Schedule A/B ecking account with Bank of America e from Schedule A/B: 17.1    Saloo   Schedule A/B: 17.1   Schedule A/B: 17.1   Schedule A/B: 17.1   Schedule A/B: 17.2   Schedule A/B: |

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|                     |                              | 1212111           |             |  |
|---------------------|------------------------------|-------------------|-------------|--|
| Fill in this infor  | mation to identify your      | case:             |             |  |
| Debtor 1            | Brenda Ramirez<br>First Name | Middle Name       | Last Name   |  |
| Debtor 2            |                              |                   |             |  |
| (Spouse if, filing) | First Name                   | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the:     | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                              |                   |             |  |
| (if known)          |                              |                   |             |  |

## Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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|  | 0430 10 00000  | Document  | Page 18                      | 3 of 54                                      | 10.47.40 000  | oo wan                                       |
|--|--|---|------------------------------|--|---|--|
| Fill in thi                              | s information to identify your   |   |                              |  |   |  |
| Debtor 1                                 | Brenda Ramirez   |   |                              |  |   |  |
|  | First Name   | Middle Name   | Last Name                    |  | <del></del>   |  |
| Debtor 2<br>(Spouse if, f                | iling) First Name  | Middle Name   | Last Name                    |  |   |  |
|  | -  | NORTHERN DISTRICT OF ILLI   |                              |  |   |  |
| United St                                | ates Bankruptcy Court for the:   | NORTHERN DISTRICT OF ILLI   | INOIS                        |  |   |  |
| Case nur<br>(if known)                   | nber   |   |                              |  |   | check if this is an mended filing            |
|  | Form 106E/F  | /ha Haya Unagayrad (  | Claima                       |  |   | 40/4E  |
|  |  | Vho Have Unsecured ( se Part 1 for creditors with PRIORITY  |                              |  |   | 12/15  |
| Schedule (<br>Schedule [<br>left. Attach | G: Executory Contracts and Unexp<br>D: Creditors Who Have Claims Sec         | s that could result in a claim. Also lis<br>oired Leases (Official Form 106G). Do<br>cured by Property. If more space is no<br>ge. If you have no information to repo | not include<br>eeded, copy t | any creditors with p<br>he Part you need, fi | partially secured claims<br>ill it out, number the en | that are listed in tries in the boxes on the |
|  | y creditors have priority unsecure   |   |                              |  |   |  |
| _  | o. Go to Part 2.   |   |                              |  |   |  |
| □ Ye                                     |  |   |                              |  |   |  |
| Part 2:                                  | List All of Your NONPRIORI   | TY Unsecured Claims   |                              |  |   |  |
| □ No                                     | s.   | part. Submit this form to the court with y  |                              |  |   |  |
| unsec                                    | ured claim, list the creditor separate ne creditor holds a particular claim, | laims in the alphabetical order of the<br>ly for each claim. For each claim listed,<br>list the other creditors in Part 3.If you ha                                   | identify what t              | ype of claim it is. Do                       | not list claims already inc                           | cluded in Part 1. If more                    |
|  |  |   |                              |  |   | Total claim                                  |
|  | Capital One  | Last 4 digits of acco   | unt number                   | 6420   |   | \$1,056.00                                   |
| F  | lonpriority Creditor's Name Po Box 30285                                     | When was the debt i   | ncurred?                     | Opened 04/14<br>8/02/16                      | Last Active   |  |
|  | Salt Lake City, UT 84130  Jumber Street City State Zlp Code                  | As of the data you fi   | la tha alaim i               | e. Chaola all that ann                       | h.  | -  |
|  | Who incurred the debt? Check one   | As of the date you fi   | ie, the claim i              | <b>s:</b> Спеск ан тат арр                   | iy  |  |
|  | Debtor 1 only  | ☐ Contingent  |                              |  |   |  |
|  | Debtor 2 only  | ☐ Unliquidated  |                              |  |   |  |
|  | Debtor 1 and Debtor 2 only   | ☐ Disputed  |                              |  |   |  |
|  | $\operatorname{\beth}$ At least one of the debtors and an                    |   | TY unsecured                 | l claim:                                     |   |  |
|  | Check if this claim is for a com   |   |                              |  |   |  |
|  | ebt<br>s the claim subject to offset?  | ☐ Obligations arising report as priority claim  |                              | ration agreement or                          | divorce that you did not                              |  |
| _  | No   | Debts to pension of   |                              | g plans, and other sir                       | milar debts   |  |
|  | ⊒ Yes  | Other. Specify  | =                            | S. ,   |   |  |
|  |  | _ Guior. Opcolly  |                              |  |   | _  |

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Case number (if know)

| DCDIO | Dieliua Nailillez  |  | Case Harriser (ii know)                      |          |  |  |
|-------|--|--|--|----------|--|--|
| 4.2   | Capital One Nonpriority Creditor's Name  | Last 4 digits of account number                              | 0541   | \$889.00 |  |  |
|       | Po Box 30285<br>Salt Lake City, UT 84130   | When was the debt incurred?                                  | Opened 03/15 Last Active 8/05/16             |          |  |  |
|       | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim                           | s: Check all that apply                      |          |  |  |
|       | Debtor 1 only  | ☐ Contingent   |  |          |  |  |
|       | ☐ Debtor 2 only  | ☐ Unliquidated   |  |          |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |  |  |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |          |  |  |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |  |          |  |  |
|       | debt Is the claim subject to offset?   | Obligations arising out of a separeport as priority claims   | ration agreement or divorce that you did not |          |  |  |
|       | ■ No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |          |  |  |
|       | Yes  | Other. Specify Credit Card                                   |  |          |  |  |
| 4.3   | Capital One  | Last 4 digits of account number                              | 6412   | \$499.00 |  |  |
|       | Nonpriority Creditor's Name  Po Box 30285 Solt Loke City LLT 94120   | When was the debt incurred?                                  | Opened 04/15 Last Active 8/06/16             |          |  |  |
|       | Salt Lake City, UT 84130  Number Street City State Zlp Code  Who incurred the debt? Check one.             | As of the date you file, the claim                           | s: Check all that apply                      |          |  |  |
|       | ■ Debtor 1 only  | ☐ Contingent   |  |          |  |  |
|       | ☐ Debtor 2 only  | ☐ Unliquidated   |  |          |  |  |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |  |  |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                                     |          |  |  |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |  |          |  |  |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |          |  |  |
|       | ■ No   | ☐ Debts to pension or profit-sharin                          | g plans, and other similar debts             |          |  |  |
|       | □Yes   | Other. Specify Credit Card                                   |  |          |  |  |
| 4.4   | Citibank/Best Buy  | Last 4 digits of account number                              | 5864   | \$918.00 |  |  |
|       | Nonpriority Creditor's Name Centalized Bankruptcy/Citicorp Credit Se Po Box 790040 Special Levie, MO 63470 | When was the debt incurred?                                  | Opened 03/15 Last Active 8/02/16             |          |  |  |
|       | Sanit Louis, MO 63179  Number Street City State Zlp Code   | As of the date you file, the claim i                         | s: Check all that apply                      |          |  |  |
|       | Who incurred the debt? Check one.  | ,  |  |          |  |  |
|       | ■ Debtor 1 only  | ☐ Contingent   |  |          |  |  |
|       | ☐ Debtor 2 only  | ☐ Unliquidated   |  |          |  |  |
|       | Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |  |  |
|       | ☐ At least one of the debtors and another  | •  |  |          |  |  |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |  |          |  |  |
|       | debt Is the claim subject to offset?   | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not |          |  |  |
|       | No   | Debts to pension or profit-sharing                           | g plans, and other similar debts             |          |  |  |
|       | ☐ Yes  | ■ Other. Specify Charge Acc                                  | ount   |          |  |  |
|       |  |  |  |          |  |  |

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| DCDIO | Dienua Namilez   |   | Case Harriber (II know)                       |            |  |  |  |
|-------|--|---|---|------------|--|--|--|
| 4.5   | City of Chicago  | Last 4 digits of account number   |   | \$1,000.00 |  |  |  |
|       | Nonpriority Creditor's Name Bureau of Parking 333 S State St, Room 540 | When was the debt incurred?   |   |            |  |  |  |
|       | Chicago, IL 60604  |   |   |            |  |  |  |
|       | Number Street City State Zlp Code                                      | As of the date you file, the claim  | is: Check all that apply                      |            |  |  |  |
|       | Who incurred the debt? Check one.                                      |   |   |            |  |  |  |
|       | ■ Debtor 1 only  | ☐ Contingent  |   |            |  |  |  |
|       | Debtor 2 only  | ☐ Unliquidated  |   |            |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |   |            |  |  |  |
|       | lacksquare At least one of the debtors and another                     | Type of NONPRIORITY unsecure  | d claim:                                      |            |  |  |  |
|       | ☐ Check if this claim is for a community                               | ☐ Student loans   |   |            |  |  |  |
|       | debt Is the claim subject to offset?                                   | Obligations arising out of a separeport as priority claims  | aration agreement or divorce that you did not |            |  |  |  |
|       | ■ No   | Debts to pension or profit-shari  | ng plans, and other similar debts             |            |  |  |  |
|       | Yes  | ■ Other. Specify tickets  |   |            |  |  |  |
|       |  |   |   |            |  |  |  |
| 4.6   | Comenity Bank/Express  | Last 4 digits of account number   | 4953  | \$531.00   |  |  |  |
|       | Nonpriority Creditor's Name  |   | Opened 11/14 Last Active                      |            |  |  |  |
|       | Po Box 18215   | When was the debt incurred?   | 8/02/16                                       |            |  |  |  |
|       | Columbus, OH 43218   |   |   |            |  |  |  |
|       | Number Street City State Zlp Code  Who incurred the debt? Check one.   | As of the date you file, the claim  | is: Check all that apply                      |            |  |  |  |
|       | _  |   |   |            |  |  |  |
|       | Debtor 1 only  | ☐ Contingent☐ Unliquidated  |   |            |  |  |  |
|       | ☐ Debtor 2 only  |   |   |            |  |  |  |
|       | Debtor 1 and Debtor 2 only   | d alaim.  |   |            |  |  |  |
|       | At least one of the debtors and another                                | Constant Income   |   |            |  |  |  |
|       | ☐ Check if this claim is for a community debt                          | unity ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not |   |            |  |  |  |
|       | Is the claim subject to offset?  | report as priority claims   |   |            |  |  |  |
|       | No   | Debts to pension or profit-sharing  |   |            |  |  |  |
|       | Yes  | Other. Specify Charge Acc   | count   |            |  |  |  |
| 4.7   | Companity Doublemandon   | Look & divite of account account  | 7000  | ¢220.00    |  |  |  |
| 4.7   | Comenity Bank/mandee  Nonpriority Creditor's Name                      | Last 4 digits of account number   | 7363  | \$320.00   |  |  |  |
|       | Po Box 182125<br>Columbus, OH 43218                                    | When was the debt incurred?   | Opened 05/15 Last Active 7/16/16              |            |  |  |  |
|       | Number Street City State Zlp Code                                      | As of the date you file, the claim  | is: Check all that apply                      |            |  |  |  |
|       | Who incurred the debt? Check one.                                      | 7.0 or and date you me, and claim   | io. Chock all that apply                      |            |  |  |  |
|       | Debtor 1 only  | ☐ Contingent  |   |            |  |  |  |
|       | Debtor 2 only  |   |   |            |  |  |  |
|       | □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed |   |   |            |  |  |  |
|       | ☐ At least one of the debtors and another                              | ·   |   |            |  |  |  |
|       | ☐ Check if this claim is for a community                               |   |   |            |  |  |  |
|       | debt Is the claim subject to offset?                                   | ☐ Obligations arising out of a separeport as priority claims  | aration agreement or divorce that you did not |            |  |  |  |
|       | ■ No   | Debts to pension or profit-sharing  | ng plans, and other similar debts             |            |  |  |  |
|       | ☐ Yes  | ■ Other. Specify Charge Acc   | count   |            |  |  |  |
|       | Other, Specify Charge Modern   |   |   |            |  |  |  |

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| Debio | Brenda Ramirez   |  | Case number (if kn      |                          |          |
|-------|--|--|-------------------------|--------------------------|----------|
| 4.8   | Comenity Bank/Victoria Secret  Nonpriority Creditor's Name                                   | Last 4 digits of account number                              | 3225                    |                          | \$250.00 |
|       | Po Box 18215<br>Columbus, OH 43218   | When was the debt incurred?                                  | Opened 02/15<br>8/02/16 | Last Active              |          |
|       | Number Street City State Zlp Code  | As of the date you file, the claim                           | is: Check all that appl | у                        |          |
|       | Who incurred the debt? Check one.  |  |                         |                          |          |
|       | Debtor 1 only  | ☐ Contingent   |                         |                          |          |
|       | Debtor 2 only  | ☐ Unliquidated   |                         |                          |          |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |                         |                          |          |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                |                          |          |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |                         |                          |          |
|       | debt<br>Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims   | aration agreement or o  | livorce that you did not |          |
|       | ■ No   | Debts to pension or profit-sharing                           | ng plans, and other sin | nilar debts              |          |
|       | Yes  | Other. Specify Charge Acc                                    | ount                    |                          |          |
| 4.9   | Credit One Bank Na   | Last 4 digits of account number                              | 2629                    |                          | \$733.00 |
|       | Nonpriority Creditor's Name  |  | Opened 07/13            | Last Activo              |          |
|       | Po Box 98873<br>Las Vegas, NV 89193  | When was the debt incurred?                                  | 8/02/16                 | Last Active              |          |
|       | Number Street City State Zlp Code  | As of the date you file, the claim                           | is: Check all that appl | у                        |          |
|       | Who incurred the debt? Check one.  |  |                         |                          |          |
|       | Debtor 1 only  | ☐ Contingent   |                         |                          |          |
|       | Debtor 2 only  | ☐ Unliquidated   |                         |                          |          |
|       | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |                         |                          |          |
|       | ☐ At least one of the debtors and another  | Type of NONPRIORITY unsecured                                | d claim:                |                          |          |
|       | ☐ Check if this claim is for a community   | ☐ Student loans  |                         |                          |          |
|       | debt<br>Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims | aration agreement or o  | livorce that you did not |          |
|       | ■ No   | Debts to pension or profit-sharing                           | ng plans, and other sin | nilar debts              |          |
|       | Yes  | Other. Specify Credit Card                                   |                         |                          |          |
| 4.1   | ERC/Enhanced Recovery Corp   | Last 4 digits of account number                              | 0558                    |                          | \$185.00 |
|       | Nonpriority Creditor's Name<br>8014 Bayberry Rd  | When was the debt incurred?                                  | Opened 05/14            |                          |          |
|       | Jacksonville, FL 32256  Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim                           | is: Check all that appl | у                        |          |
|       | Debtor 1 only  | Пол  |                         |                          |          |
|       | <u> </u>   | ☐ Contingent   |                         |                          |          |
|       | Debtor 2 only  | ☐ Unliquidated   |                         |                          |          |
|       | Debtor 1 and Debtor 2 only   | Disputed   | d alaim.                |                          |          |
|       | At least one of the debtors and another  | Type of NONPRIORITY unsecured  ☐ Student loans               | u cidiiii.              |                          |          |
|       | ☐ Check if this claim is for a community debt  | ☐ Obligations arising out of a sepa                          | aration agreement or o  | livorce that you did not |          |
|       | Is the claim subject to offset?  | report as priority claims                                    |                         |                          |          |
|       | ■ No   | Debts to pension or profit-sharing                           |                         | nilar debts              |          |
|       | Yes  | Other. Specify Collection A                                  | ttorney At T            |                          |          |

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|          | Dienua Nammez  |  | Case Harriser (II know)                      |          |
|----------|--|--|--|----------|
| 4.1<br>1 | Fingerhut  | Last 4 digits of account number  | 5080   | \$426.00 |
|          | Nonpriority Creditor's Name<br>6250 Ridgewood Rd<br>St Cloud, MN 56303   | When was the debt incurred?  | Opened 05/15 Last Active 7/17/16             |          |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim   | s: Check all that apply                      |          |
|          | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans            |  |          |
|          | Is the claim subject to offset?  | ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin | ration agreement or divorce that you did not |          |
|          | ■ No □ Yes   | ■ Other. Specify Charge Acc  |  |          |
| 4.1      | Fst Premier Nonpriority Creditor's Name  | Last 4 digits of account number  | 0336   | \$668.00 |
|          | 601 S Minneapolis Ave<br>Sioux Falls, SD 57104   | When was the debt incurred?  | Opened 06/13 Last Active 7/16/16             |          |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim   | s: Check all that apply                      |          |
|          | □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another   | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans            | d claim:                                     |          |
|          | ☐ Check if this claim is for a community debt Is the claim subject to offset?  | Obligations arising out of a separeport as priority claims                                       | ration agreement or divorce that you did not |          |
|          | ■ No<br>□ Yes  | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card                                 | g plans, and other similar debts             |          |
| 4.1<br>3 | Fst Premier Nonpriority Creditor's Name  | Last 4 digits of account number  | 2626   | \$620.00 |
|          | 601 S Minneapolis Ave<br>Sioux Falls, SD 57104   | When was the debt incurred?  | Opened 05/12 Last Active 8/02/16             |          |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim   | s: Check all that apply                      |          |
|          | ■ Debtor 1 only  | ☐ Contingent   |  |          |
|          | Debtor 2 only  | ☐ Unliquidated   |  |          |
|          | ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed   |  |          |
|          | $\square$ At least one of the debtors and another  | Type of NONPRIORITY unsecured  | d claim:                                     |          |
|          | ☐ Check if this claim is for a community debt Is the claim subject to offset?  | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims                     | ration agreement or divorce that you did not |          |
|          | ■ No   | Debts to pension or profit-sharin  | g plans, and other similar debts             |          |
|          | Yes  | ■ Other Specify Credit Card  |  |          |

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| Jebio    | Brenda Ramirez  |  | Case number (if know)                         |            |
|----------|---|--|---|------------|
| 4.1<br>7 | Merrick Bank/Geico Card   | Last 4 digits of account number  | 6165  | \$1,284.00 |
|          | Nonpriority Creditor's Name Po Box 23356 Pittsburg, PA 15222  | When was the debt incurred?  | Opened 01/15 Last Active 7/17/16              |            |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim   | is: Check all that apply                      |            |
|          | ■ Debtor 1 only □ Debtor 2 only   | ☐ Contingent ☐ Unliquidated  |   |            |
|          | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community | ☐ Disputed  Type of NONPRIORITY unsecured  ☐ Student loans                   | d claim:                                      |            |
|          | debt Is the claim subject to offset?  | report as priority claims  | aration agreement or divorce that you did not |            |
|          | ■ No<br>□ Yes   | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card             |   |            |
| 4.1      | Mid Am B&T Credit Card  Nonpriority Creditor's Name   | Last 4 digits of account number  | 9808  | \$355.00   |
|          | Po Box 68 Ralla, MO 65402   | When was the debt incurred?  | Opened 07/15 Last Active 8/02/16              |            |
|          | Number Street City State Zlp Code  Who incurred the debt? Check one.  | As of the date you file, the claim   | is: Check all that apply                      |            |
|          | ■ Debtor 1 only □ Debtor 2 only   | ☐ Contingent ☐ Unliquidated  |   |            |
|          | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community | ☐ Disputed  Type of NONPRIORITY unsecured ☐ Student loans                    | d claim:                                      |            |
|          | debt Is the claim subject to offset?  | report as priority claims  | aration agreement or divorce that you did not |            |
|          | ■ No<br>□ Yes   | ☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Card             | g plans, and other similar debts              |            |
| 4.1      | Mid Am B&T Credit Card  Nonpriority Creditor's Name   | Last 4 digits of account number  | 6178  | \$343.00   |
|          | Po Box 68<br>Ralla, MO 65402  | When was the debt incurred?  | Opened 12/15 Last Active 7/18/16              |            |
|          | Number Street City State Zlp Code Who incurred the debt? Check one.   | As of the date you file, the claim   | is: Check all that apply                      |            |
|          | ■ Debtor 1 only □ Debtor 2 only   | ☐ Contingent☐ Unliquidated   |   |            |
|          | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another  | ☐ Disputed  Type of NONPRIORITY unsecured                                    | d claim:                                      |            |
|          | ☐ Check if this claim is for a community debt Is the claim subject to offset?                                   | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not |            |
|          | ■ No  | Debts to pension or profit-sharin  | ng plans, and other similar debts             |            |
|          | Yes   | Other. Specify Credit Card   |   |            |

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| Brenda Ramirez                            | Case number (if know)   |     |  |  |  |  |
|---|---|-----|--|--|--|--|
| PLS Loan Store                            | Last 4 digits of account number   | \$8 |  |  |  |  |
| Nonpriority Creditor's Name               |   |     |  |  |  |  |
| 3164 175th St.                            | When was the debt incurred?   |     |  |  |  |  |
| Hazel Crest, IL 60429                     |   |     |  |  |  |  |
| Number Street City State Zlp Code         | As of the date you file, the claim is: Check all that apply                     |     |  |  |  |  |
| Who incurred the debt? Check one.         |   |     |  |  |  |  |
| ■ Debtor 1 only                           | ☐ Contingent  |     |  |  |  |  |
| ☐ Debtor 2 only                           | ☐ Unliquidated  |     |  |  |  |  |
| ☐ Debtor 1 and Debtor 2 only              | ☐ Disputed  |     |  |  |  |  |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim:  |     |  |  |  |  |
| ☐ Check if this claim is for a community  | ☐ Student loans   |     |  |  |  |  |
| debt                                      | ☐ Obligations arising out of a separation agreement or divorce that you did not |     |  |  |  |  |
| Is the claim subject to offset?           | report as priority claims   |     |  |  |  |  |
| No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts  |     |  |  |  |  |
| □Yes                                      | ■ Other. Specify loan   |     |  |  |  |  |

### Part 3: List Others to Be Notified About a Debt That You Already Listed

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | 7  | Total Claim |
|--------------|-----|---|-----|----|-------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|              |     |   |     | 1  | Total Claim |
|              | 6f. | Student loans   | 6f. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 11,735.00   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 11,735.00   |

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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|                     |                          | 12101111          |             |  |
|---------------------|--------------------------|-------------------|-------------|--|
| Fill in this infor  | mation to identify your  | case:             |             |  |
| Debtor 1            | Brenda Ramirez           | Middle Name       | Last Name   |  |
| Dobtor 2            | First Name               | iviluale ivame    | Lastivame   |  |
| Debtor 2            |                          |                   |             |  |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name   |  |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number         |                          |                   |             |  |
| (if known)          |                          |                   |             |  |
| ,                   |                          |                   |             |  |
|                     |                          |                   |             |  |

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with | whom you have the or, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | <del>_</del>                            |
| 2.2 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          | <del>_</del>                            |
| 2.3 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.4 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   | _                                       |
|     | City      |              | State   | ZIP Code          |   |
| 2.5 |           |              |   |                   |   |
|     | Name      |              |   |                   | _                                       |
|     | Number    | Street       |   |                   |   |
|     | City      |              | State   | ZIP Code          | _                                       |
|     | •         |              |   |                   |   |

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|   |   | Docume  | ent Page 27 d  | )T 54   |   |
|---|---|---|--|---|---|
| Fill in this  | information to identify your  |   |  |   |   |
| Debtor 1  | Brenda Ramirez  |   |  |   |   |
|   | First Name  | Middle Name   | Last Name  |   |   |
| Debtor 2<br>(Spouse if, filin                               | rg) First Name  | Middle Name   | Last Name  |   |   |
|   |   | NORTHERN DISTRICT   |  |   |   |
| United Stat   | tes Bankruptcy Court for the:   | NORTHERN DISTRICT   | OF ILLINOIS  |   |   |
| Case numb   | per   |   |  |   | ☐ Check if this is an   |
| ,   |   |   |  |   | amended filing  |
| Ott: -: - I   | Farms 40011   |   |  |   |   |
|   | Form 106H   | -1.4  |  |   |   |
| Sched   | ule H: Your Cod   | eptors  |  |   | 12/15   |
| No Yes  2. With Arizona  No. Yes.  3. In Coluin line Form 1 | nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3.  Did your spouse, former spouting 1, list all of your codebt 2 again as a codebtor only i | I lived in a community pr<br>Nevada, New Mexico, Pu<br>use, or legal equivalent live<br>ors. Do not include your<br>f that person is a guaran | roperty state or territor<br>erto Rico, Texas, Wash<br>e with you at the time?<br>spouse as a codebtor<br>ttor or cosigner. Make | y? (Community property ington, and Wisconsin.)  if your spouse is filing sure you have listed the | states and territories include with you. List the person shown e creditor on Schedule D (Official schedule E/F, or Schedule G to fill |
| (   | Column 1: Your codebtor  Name, Number, Street, City, State and ZI   | P Code  |  | Column 2: The cred  | ditor to whom you owe the debt  |
|   |   |   |  | _   |   |
| 3.1   | Name  |   |  | ☐ Schedule D, line ☐ Schedule E/F. lir  |   |
|   |   |   |  | ☐ Schedule E/F, III   |   |
| _   | Number Street   |   |  |   |   |
|   | City  | State   | ZIP Code   |   |   |
|   |   |   |  |   |   |
| 3.2   | Nama  |   |  | Schedule D, line  |   |
| r   | Name  |   |  | ☐ Schedule E/F, lir   |   |
|   |   |   |  | ☐ Schedule G, line  | ·   |
|   | Number Street<br>City   | State   | ZIP Code   |   |   |
| •   | ~··,  | Sidio   | 211 0000   |   |   |

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| Fill               | in this information to  | identify your ca              | ase:  |  |                        |                  |                           |                     |                         |                              |                 |
|--------------------|---|-------------------------------|---|--|------------------------|------------------|---------------------------|---------------------|-------------------------|------------------------------|-----------------|
| Del                | otor 1  | Brenda Rami                   | rez   |  |                        |                  |                           |                     |                         |                              |                 |
|                    | otor 2<br>ouse, if filing)  |                               |   |  |                        | _                |                           |                     |                         |                              |                 |
| Uni                | ted States Bankrupto  | cy Court for the              | : NORTHERN DISTRIC  | CT OF ILLINOIS                                 |                        |                  |                           |                     |                         |                              |                 |
|                    | se number<br>   |                               |   |  |                        |                  |                           | mended<br>oplemer   | nt showing              | postpetition                 | chapter         |
| 0                  | fficial Form  | 106I                          |   |  |                        |                  | MM /                      | ' DD/ Y\            | YYY                     | -                            |                 |
| S                  | chedule I: \  | our Inco                      | ome   |  |                        |                  |                           |                     |                         |                              | 12/15           |
| sup<br>spo<br>atta | plying correct infor<br>use. If you are sepa<br>ch a separate shee                      | mation. If you arated and you | sible. If two married peo<br>are married and not filii<br>r spouse is not filing wi<br>On the top of any additi | ng jointly, and your ith you, do not inclu     | spouse i<br>ide infori | is livi<br>matio | ng with you<br>n about yo | u, inclu<br>ur spot | de inform<br>use. If mo | ation about<br>re space is i | your<br>needed, |
| 1.                 | Fill in your emplo information.   | yment                         |   | Debtor 1                                       | Debtor 1               |                  |                           |                     | or non-fili             | ing spouse                   |                 |
|                    | If you have more than one job, attach a separate page with information about additional | Employment status             | ■ Employed  | ■ Employed                                     |                        |                  |                           | yed                 |                         |                              |                 |
|                    |   | Employment status             | ☐ Not employed  |  |                        |                  | Not em                    | nployed             |                         |                              |                 |
|                    | employers.  |                               | Occupation  | Customer Service                               | е                      |                  |                           |                     |                         |                              |                 |
|                    | Include part-time, s<br>self-employed work  |                               | Employer's name   | Allied Benefit Systems, Inc                    |                        |                  |                           |                     |                         |                              |                 |
|                    | Occupation may in or homemaker, if it   |                               | Employer's address  | 200 W Adams S<br>Suite 500<br>Chicago, IL 6060 |                        |                  |                           |                     |                         |                              |                 |
|                    |   |                               | How long employed t   | here? 8 years                                  | i                      |                  |                           |                     |                         |                              |                 |
| Par                | t 2: Give Deta  | ails About Mon                | thly Income   |  |                        |                  |                           |                     |                         |                              |                 |
|                    | mate monthly inco   |                               | ate you file this form. If  | you have nothing to r                          | eport for              | any li           | ne, write \$0             | in the s            | space. Incl             | lude your nor                | n-filing        |
|                    | u or your non-filing s<br>e space, attach a sep   |                               | ore than one employer, co<br>this form.   | ombine the informatio                          | n for all e            | emplo            | yers for tha              | t persor            | on the lin              | es below. If y               | ou need         |
|                    |   |                               |   |  |                        |                  | For Debtor                | 1                   | For Deb<br>non-filin    | tor 2 or<br>ng spouse        |                 |
| 2.                 |   |                               | ry, and commissions (b<br>calculate what the monthl   |  | 2.                     | \$_              | 3,49                      | 3.00                | \$                      | N/A                          |                 |
| 3.                 | Estimate and list   | monthly overti                | ime pay.  |  | 3.                     | +\$_             |                           | 0.00                | +\$                     | N/A                          |                 |
| 4.                 | Calculate gross li  | ncome. Add lir                | ne 2 + line 3.  |  | 4.                     | \$               | 3,493.0                   | 00_                 | \$                      | N/A_                         |                 |

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| Deb | tor 1         | Brenda Ramirez   | -          | Ca  | ase number ( | if known) |          |                   |              |          |
|-----|---------------|--|------------|-----|--------------|-----------|----------|-------------------|--------------|----------|
|     |               |  |            |     |              |           |          |                   |              |          |
|     |               |  |            | I   | For Debtor   | 1         |          | or Debtor         |              |          |
|     | Con           | y line 4 here  | 4.         | _   | 3.4          | 93.00     | <u>n</u> | on-filing s       | pouse<br>N/A |          |
|     | COP           | y line 4 nere  | 4.         | `   | 3,4          | 93.00     | φ        |                   | IN/A         | -        |
| 5.  | List          | all payroll deductions:  |            |     |              |           |          |                   |              |          |
|     | 5a.           | Tax, Medicare, and Social Security deductions  | 5a.        |     | 5 7          | 86.00     | \$       |                   | N/A          |          |
|     | 5b.           | Mandatory contributions for retirement plans   | 5b.        |     | ·            | 0.00      | \$       |                   | N/A          | _        |
|     | 5c.           | Voluntary contributions for retirement plans   | 5c.        |     | ·            | 0.00      | \$       |                   | N/A          | _        |
|     | 5d.           | Required repayments of retirement fund loans   | 5d.        |     | <u> </u>     | 0.00      | \$       |                   | N/A          | _        |
|     | 5e.<br>5f.    | Insurance  | 5e.<br>5f. |     | 6<br>6       | 44.00     | \$<br>\$ |                   | N/A          |          |
|     | 51.<br>5g.    | Domestic support obligations Union dues  | 5g.        |     |              | 0.00      | Ф<br>\$  |                   | N/A<br>N/A   | _        |
|     | 5g.<br>5h.    | Other deductions. Specify:   | 5h.        |     | ·            | 0.00      |          |                   | N/A          | _        |
| 6.  |               | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6.         | \$  | ·            |           | \$       |                   | N/A          | -        |
|     |               |  |            | Ĭ.  |              | 30.00     |          |                   |              | -        |
| 7.  |               | sulate total monthly take-home pay. Subtract line 6 from line 4.   | 7.         | \$  | 2,6          | 63.00     | \$       |                   | N/A          | -        |
| 8.  | List<br>8a.   | all other income regularly received:  Net income from rental property and from operating a business,   |            |     |              |           |          |                   |              |          |
|     | oa.           | profession, or farm  |            |     |              |           |          |                   |              |          |
|     |               | Attach a statement for each property and business showing gross  |            |     |              |           |          |                   |              |          |
|     |               | receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a.        |     | 6            | 0.00      | \$       |                   | N/A          |          |
|     | 8b.           | Interest and dividends   | 8b.        |     |              | 0.00      | \$       |                   | N/A          |          |
|     | 8c.           | Family support payments that you, a non-filing spouse, or a dependent regularly receive  |            |     |              | 0.00      | *        |                   | 14/71        | _        |
|     |               | Include alimony, spousal support, child support, maintenance, divorce  |            |     |              |           |          |                   |              |          |
|     |               | settlement, and property settlement.   | 8c.        | 9   | \$           | 0.00      | \$       |                   | N/A          |          |
|     | 8d.           | Unemployment compensation  | 8d.        |     | 6            | 0.00      | \$       |                   | N/A          | -        |
|     | 8e.           | Social Security  | 8e.        |     | §            | 0.00      | \$       |                   | N/A          | _        |
|     | 8f.           | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance   |            |     |              |           |          |                   |              |          |
|     |               | that you receive, such as food stamps (benefits under the Supplemental   | ,          |     |              |           |          |                   |              |          |
|     |               | Nutrition Assistance Program) or housing subsidies.  |            |     |              |           |          |                   |              |          |
|     | •             | Specify:   | _ 8f.      |     |              | 0.00      | \$       |                   | N/A          | _        |
|     | 8g.           | Pension or retirement income   | 8g.        |     | <u> </u>     | 0.00      |          |                   | N/A          | _        |
|     | 8h.           | Other monthly income. Specify:   | 8h.        | + : |              | 0.00      | + 5      |                   | N/A          | -        |
| 9.  | Add           | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.         | \$  |              | 0.00      | \$       |                   | N/A          | 4        |
|     |               |  | _          | L   |              |           |          |                   |              |          |
| 10. | Calc          | culate monthly income. Add line 7 + line 9.  | 10.        | \$  | 2,663.0      | 0 + \$    |          | N/A               | = \$         | 2,663.00 |
|     | Add           | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |            |     | ,            | I L       |          |                   |              | ,        |
| 11. | Inclu<br>othe | e all other regular contributions to the expenses that you list in Schedule ide contributions from an unmarried partner, members of your household, your refriends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not cify: | deper      |     | , ,          |           | •        | n <i>Schedule</i> | ∍ J.<br>+\$  | 0.00     |
| 12. |               | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines   |            |     |              |           |          |                   | \$           | 2,663.00 |
|     |               |  |            |     |              |           |          |                   | Combi        |          |
| 13. | Dov           | ou expect an increase or decrease within the year after you file this form   | ?          |     |              |           |          |                   | monthl       | y income |
| 10. |               | No.  | •          |     |              |           |          |                   |              |          |
|     | _             | Yes Explain:   |            |     |              |           |          |                   |              |          |

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|                   |  |  |                                     |   |  | -              |       |                                 |  |       |  |
|-------------------|--|--|-------------------------------------|---|--|----------------|-------|---------------------------------|--|-------|--|
| Fill              | in this informa                                  | ition to identify yo                                   | our case:                           |   |  |                |       |                                 |  |       |  |
| Deb               | otor 1   | Brenda Rami  | rez                                 |   |  | Cł             |       | if this is:<br>n amended filing |  |       |  |
|                   | otor 2<br>ouse, if filing)                       |  |                                     |   |  |                | Α     | supplement show                 | ving postpetition chapt<br>the following date: | ter   |  |
| Unit              | ted States Bankr                                 | ruptcy Court for the                                   | : NORTH                             | IERN DISTRICT OF ILLI   | NOIS                                   | MM / DD / YYYY |       |                                 |  |       |  |
| 1                 | se number<br>nown)                               |  |                                     |   |  |                |       |                                 |  |       |  |
| 0                 | fficial Fo                                       | rm 106J  |                                     |   |  |                |       |                                 |  |       |  |
| S                 | chedule  | J: Your  | Exper                               | ises  |  |                |       |                                 | 1  | 12/15 |  |
| Be<br>info<br>nur | as complete a<br>ormation. If m<br>mber (if know | and accurate as<br>lore space is ne<br>n). Answer evel | possible<br>eded, atta<br>y questio | . If two married people a   |  |                |       |                                 |  |       |  |
| Par<br>1.         | t 1: Descr<br>Is this a joir                     | ribe Your House  | hold                                |   |  |                |       |                                 |  |       |  |
|                   | ■ No. Go to □ Yes. <b>Doe</b>                    | o line 2.<br>es Debtor 2 live                          | •                                   | ate household?<br>al Form 106J-2, <i>Expense</i>                        | as for Sanarata House                  | ehold of D     | ehtoi | r 2                             |  |       |  |
| _                 |  |  | _                                   | ari omi 1000-2, <i>Expons</i> e   | 23 for Ocparate Flouse                 | SHOIG OF D     | CDIO  | . Z.                            |  |       |  |
| 2.                | Do you have                                      | e dependents?  | ☐ No                                |   |  |                |       |                                 |  |       |  |
|                   | Do not list D<br>Debtor 2.                       | ebtor 1 and  | Yes.                                | Fill out this information for each dependent                            | Dependent's relat<br>Debtor 1 or Debto |                |       | Dependent's age                 | Does dependent live with you?                  |       |  |
|                   | Do not state dependents                          |  |                                     |   | Son                                    |                |       |                                 | □ No ■ Yes □ No □ Yes □ No                     |       |  |
|                   |  |  |                                     |   |  |                |       |                                 | ☐ Yes ☐ No ☐ Yes                               |       |  |
| 3.                | expenses o                                       | penses include<br>f people other t<br>d your depende   | han $_{oldsymbol{\sqcap}}$          | No<br>Yes   |  |                |       |                                 |  |       |  |
| Est               | imate your ex                                    |  | our bankr                           | ly Expenses<br>uptcy filing date unless<br>y is filed. If this is a sup |  |                |       |                                 |  |       |  |
| the               |  | h assistance an  |                                     | government assistance<br>cluded it on <i>Schedule I:</i>                |  |                |       | Your expe                       | enses  |       |  |
| 4.                |  | or home owners<br>and any rent for th                  |                                     | ses for your residence.<br>or lot.                                      | . Include first mortgag                | e 4.           | \$    |                                 | 700.00   |       |  |
|                   | If not includ                                    | led in line 4:   |                                     |   |  |                |       |                                 |  |       |  |
|                   | 4a. Real e                                       | estate taxes   |                                     |   |  | 4a.            | \$    |                                 | 0.00   |       |  |
|                   |  | rty, homeowner's                                       |                                     |   |  | 4b.            |       |                                 | 0.00   |       |  |
|                   |  |  |                                     | upkeep expenses   |  | 4c.            |       |                                 | 0.00   |       |  |
| 5                 |  | owner's associat                                       |                                     |   | omo oquity loons                       | 4d.            |       |                                 | 0.00   |       |  |
| 5.                | Auditional f                                     | nortyaye payme   | anto for yo                         | <b>our residence</b> , such as h  | ionie equity Ioans                     | ວ.             | \$    |                                 | 0.00   |       |  |

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| Debtor 1        | Brenda Ramirez   | Case num       | ber (if known) |                            |
|-----------------|--|----------------|----------------|----------------------------|
| 6. <b>Uti</b> l | lities:  |                |                |                            |
| 6a.             | Electricity, heat, natural gas   | 6a.            | \$             | 260.00                     |
| 6b.             |  | 6b.            | \$             | 0.00                       |
| 6c.             |  | 6c.            |                | 320.00                     |
| 6d.             |  | 6d.            | ·              | 0.00                       |
|                 | od and housekeeping supplies   | <del></del> 7. | · -            | 550.00                     |
|                 | ildcare and children's education costs   | 8.             | \$             | 0.00                       |
|                 | othing, laundry, and dry cleaning  | 9.             | ·              | 200.00                     |
|                 | rsonal care products and services  | 10.            | ·              | 150.00                     |
|                 | dical and dental expenses  | 11.            | ·              | 50.00                      |
|                 | insportation. Include gas, maintenance, bus or train fare.   |                |                |                            |
|                 | not include car payments.  | 12.            | \$             | 120.00                     |
| 3. <b>Ent</b>   | tertainment, clubs, recreation, newspapers, magazines, and books   | 13.            | \$             | 100.00                     |
| . Cha           | aritable contributions and religious donations   | 14.            | \$             | 5.00                       |
| . <b>Ins</b>    | urance.  |                |                |                            |
| Do              | not include insurance deducted from your pay or included in lines 4 or 20.   |                |                |                            |
| 15a             | a. Life insurance  | 15a.           | ·              | 0.00                       |
| 15b             | o. Health insurance  | 15b.           | · ·            | 0.00                       |
| 150             | c. Vehicle insurance   | 15c.           | \$             | 0.00                       |
| 150             | d. Other insurance. Specify:   | 15d.           | \$             | 0.00                       |
|                 | <b>kes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.  |                |                | <u> </u>                   |
|                 | ecify:   | 16.            | \$             | 0.00                       |
|                 | tallment or lease payments:  |                |                |                            |
|                 | a. Car payments for Vehicle 1  | 17a.           | ·              | 0.00                       |
|                 | o. Car payments for Vehicle 2  | 17b.           | ·              | 0.00                       |
|                 | c. Other. Specify:   | 17c.           | *              | 0.00                       |
|                 | d. Other. Specify:   | 17d.           | \$             | 0.00                       |
|                 | ur payments of alimony, maintenance, and support that you did not report as  | 10             | ¢              | 0.00                       |
| dec             | ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).  | 18.            |                |                            |
|                 | ner payments you make to support others who do not live with you.  | 40             | \$             | 200.00                     |
|                 | Support of Son that lives with father  | 19.            |                |                            |
|                 | ner real property expenses not included in lines 4 or 5 of this form or on Scheo   |                |                | 0.00                       |
|                 | a. Mortgages on other property   | 20a.           |                | 0.00                       |
|                 | o. Real estate taxes   | 20b.           | · ·            | 0.00                       |
|                 | c. Property, homeowner's, or renter's insurance  | 20c.           |                | 0.00                       |
|                 | d. Maintenance, repair, and upkeep expenses  | 20d.           |                | 0.00                       |
|                 | e. Homeowner's association or condominium dues   | 20e.           | ·              | 0.00                       |
| . Oth           | ner: Specify:  | 21.            | +\$            | 0.00                       |
| . Cal           | culate your monthly expenses   |                |                |                            |
|                 | a. Add lines 4 through 21.   |                | \$             | 2,655.00                   |
|                 | b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   |                | \$             | 2,000.00                   |
|                 | c. Add line 22a and 22b. The result is your monthly expenses.  |                | \$             | 2.655.00                   |
| 220             | . Add the ZZa and ZZD. The result is your monthly expenses.  |                | Ψ              | 2,655.00                   |
| 3. Cal          | culate your monthly net income.  |                | ,              |                            |
| 23a             | a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a.           | \$             | 2,663.00                   |
| 23b             | o. Copy your monthly expenses from line 22c above.   | 23b.           | -\$            | 2,655.00                   |
|                 |  |                |                |                            |
| 230             | c. Subtract your monthly expenses from your monthly income.  |                | •              | 9.00                       |
|                 | The result is your monthly net income.   | 23c.           | Ф              | 8.00                       |
| For             | you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your diffication to the terms of your mortgage? |                |                | e or decrease because of a |
|                 |  |                |                |                            |
|                 | No.  |                |                |                            |

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| Fill in this inform   | nation to identify your                          | case:                     |                             |                           |  |  |  |  |  |  |
|---|--|---------------------------|-----------------------------|---------------------------|--|--|--|--|--|--|
| Debtor 1  | Brenda Ramirez                                   |                           |                             |                           |  |  |  |  |  |  |
|   | First Name                                       | Middle Name               | Last Name                   |                           |  |  |  |  |  |  |
| Debtor 2<br>(Spouse if, filing)                             | First Name                                       | Middle Name               | Last Name                   |                           |  |  |  |  |  |  |
| United States Ba  | nkruptcy Court for the:                          | NORTHERN DISTRICT         | OF ILLINOIS                 |                           |  |  |  |  |  |  |
| Case number<br>(if known)                                   |  |                           |                             |                           | ☐ Check if this is an amended filing                                 |  |  |  |  |  |
| Official Forn  Declarat                                     |  | n Individual              | Debtor's Scl                | hedules                   | 12/15  |  |  |  |  |  |
| You must file this<br>obtaining money<br>years, or both. 18 | s form whenever you fi                           | n connection with a bank  | or amended schedules.       | Making a false stateme    | ent, concealing property, or<br>or imprisonment for up to 20         |  |  |  |  |  |
| · ·   |  | one who is NOT an attor   | ney to help you fill out ba | ankruptcy forms?          |  |  |  |  |  |  |
| ■ No  |  |                           |                             |                           |  |  |  |  |  |  |
| ☐ Yes. N  | lame of person                                   |                           |                             |                           | otcy Petition Preparer's Notice,<br>ad Signature (Official Form 119) |  |  |  |  |  |
|   | Ity of perjury, I declare<br>e true and correct. | that I have read the sumi | mary and schedules filed    | l with this declaration a | and  |  |  |  |  |  |
| X /s/ Brer  | nda Ramirez                                      |                           | X                           |                           |  |  |  |  |  |  |
| Brenda  | Brenda Ramirez Signature of Debtor 2             |                           |                             |                           |  |  |  |  |  |  |

Date

Signature of Debtor 1

Date September 23, 2016

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| Fil         | l in this inform                                 | nation to identify you  | r case:  |   |  |   |
|-------------|--|---|--|---|--|---|
| De          | btor 1   | Brenda Ramirez  |  |   |  |   |
| D-          | htor O   | First Name  | Middle Name  | Last Name   |  |   |
| 1 -         | btor 2<br>ouse if, filing)                       | First Name  | Middle Name  | Last Name   |  |   |
| Un          | ited States Bar                                  | nkruptcy Court for the:   | NORTHERN DISTRICT (  | OF ILLINOIS   |  |   |
|             |  |   |  |   |  |   |
|             | nown)  |   |  |   | _  | Check if this is an<br>mended filing                  |
| St          |  | of Financial  | Affairs for Individ  |   |  | 4/16  |
| info<br>nur | ormation. If m<br>mber (if knowr<br>rt 1: Give D | ore space is needed,<br>a). Answer every que                                      | attach a separate sheet to stion.                              | this form. On the top of any                          | equally responsible for sup<br>y additional pages, write you |   |
|             | <ul><li>□ Married</li><li>■ Not mar</li></ul>    | ried  |  |   |  |   |
| 2.          | During the la                                    | ast 3 years, have you   | lived anywhere other than                                      | where you live now?                                   |  |   |
|             | □ No   |   |  |   |  |   |
|             | _  | t all of the places you l   | ived in the last 3 years. Do no                                | ot include where you live now                         | 1.   |   |
|             | Debtor 1 Pr                                      | ior Address:  | Dates Debtor 1 lived there                                     | Debtor 2 Prior Ad                                     | dress:   | Dates Debtor 2<br>lived there                         |
|             | 2250 N Lav<br>Chicago, IL                        |   | From-To:<br>2010 - 2014  | ☐ Same as Debtor                                      | 1  | ☐ Same as Debtor 1 From-To:                           |
|             | No Yes. Ma                                       | es include Arizona, Ca<br>ke sure you fill out <i>Scl</i><br>n the Sources of You | lifornia, Idaho, Louisiana, Ne<br>nedule H: Your Codebtors (O  | vada, New Mexico, Puerto R                            | ity property state or territorico, Texas, Washington and V   | Visconsin.)   |
| •           | Fill in the tota                                 | I amount of income yo   | u received from all jobs and a<br>have income that you receive | all businesses, including part                        | time activities.   | maar yeare.   |
|             | □ No   |   |  |   |  |   |
|             | Yes. Fill  | in the details.   |  |   |  |   |
|             |  |   | Debtor 1   |   | Debtor 2   |   |
|             |  |   | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                   | Gross income<br>(before deductions<br>and exclusions) |
|             |  | of current year until<br>d for bankruptcy:  | ■ Wages, commissions, bonuses, tips                            | \$34,282.16   | ☐ Wages, commissions, bonuses, tips                          |   |
|             |  |   | ☐ Operating a business   |   | ☐ Operating a business                                       |   |

Official Form 107

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Case number (if known) Debtor 1 Brenda Ramirez

|    |                                |  |   | Debtor 1  |  |                          | D                                   | ebtor 2                             |             |   |
|----|--------------------------------|--|---|---|--|--------------------------|-------------------------------------|-------------------------------------|-------------|---|
|    |                                |  |   | Sources of income<br>Check all that apply.  | Gross i<br>(before<br>exclusion                                    | deductions and           |                                     | ources of inco<br>heck all that ap  |             | Gross income<br>(before deductions<br>and exclusions) |
|    | r last caler<br>inuary 1 to    | ndar year:<br>December                         | 31, 2015 )                                      | ■ Wages, commissions, bonuses, tips   |  | \$46,264.00              |                                     | ☐ Wages, commissions, bonuses, tips |             |   |
|    |                                |  |   | ☐ Operating a business  |  |                          |                                     | Operating a b                       | usiness     |   |
|    |                                | dar year be<br>December                        |   | ■ Wages, commissions, bonuses, tips   |  | \$44,516.00              | ☐ Wages, commissions, bonuses, tips |                                     |             |   |
|    |                                |  |   | ☐ Operating a business  |  |                          |                                     | Operating a b                       | usiness     |   |
| 5. | Include in and other winnings. | come regard<br>public benef<br>If you are fili | less of wheth<br>it payments;<br>ng a joint cas | e during this year or the two<br>ler that income is taxable. Exa<br>pensions; rental income; inter<br>le and you have income that y<br>ly the from each source separate | other income are a<br>nds; money collect<br>ad together, list it o | alimo<br>cted to<br>only | from lawsuits; ro<br>once under Deb | oyalties; and<br>otor 1.            |             |   |
|    | _                              | Fill in the de                                 | tails.  |   |  |                          |                                     |                                     |             |   |
|    |                                |  |   | Debtor 1  |  |                          | D                                   | ebtor 2                             |             |   |
|    |                                |  |   | Sources of income<br>Describe below.  | each so  | deductions and           | _                                   | ources of inco<br>escribe below.    | me          | Gross income<br>(before deductions<br>and exclusions) |
| Pa | rt 3: Lis                      | t Certain Pa                                   | yments You                                      | Made Before You Filed for I   | Bankrupto  | ;y                       |                                     |                                     |             |   |
| 6. | Are eithe ☐ No.                | Neither De individual p                        | ebtor 1 nor Dorimarily for a                    | s debts primarily consumer<br>bebtor 2 has primarily consu-<br>personal, family, or househole<br>are you filed for bankruptcy, di                                       | imer debts<br>d purpose  |                          |                                     |                                     |             | I (8) as "incurred by ar                              |
|    |                                | No.  | Go to line 7                                    |   | u you pay  | arry creditor a tota     | ai Oi s                             | \$6,425 OF ITIOTE                   | ; :         |   |
|    |                                | □ Yes  | List below e                                    | each creditor to whom you pai<br>editor. Do not include paymen<br>payments to an attorney for th  | nts for dom  | estic support obliq      |                                     |                                     |             |   |
|    |                                | * Subject                                      | to adjustment                                   | on 4/01/19 and every 3 years  | s after that   | for cases filed on       | or a                                | fter the date of                    | adjustment. |   |
|    | ■ Yes.                         |  |   | r both have primarily consure you filed for bankruptcy, di  |  |                          | al of S                             | \$600 or more?                      |             |   |
|    |                                | ■ No.  | Go to line 7                                    |   |  |                          |                                     |                                     |             |   |
|    |                                | ☐ Yes  | include pay                                     | each creditor to whom you pai<br>ments for domestic support of<br>this bankruptcy case.   |  |                          |                                     |                                     |             |   |
|    | Creditor                       | 's Name and                                    | l Address                                       | Dates of payme  | nt   | Total amount             | Α                                   | mount you                           | Was this p  | ayment for  |

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Case number (if known) Debtor 1 Brenda Ramirez

| 7.   | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|--|---|---------------------------------------|---------------------|----------------------|------------------------------|------------------------------|--|--|--|--|--|--|
|  | ■ No  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Yes. List all payments to an insider.   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Insider's Name and Address  | Dates of payment                      | Total amount paid   | Amount you still owe | Reason for                   | this payment                 |  |  |  |  |  |  |
| 8.   | Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?  Include payments on debts guaranteed or cosigned by an insider.  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | ■ No □ Yes. List all payments to an insider   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Insider's Name and Address  | Dates of payment                      | Total amount paid   | Amount you still owe |                              | this payment<br>ditor's name |  |  |  |  |  |  |
|  | Marking Barressian  |                                       | •                   |                      |                              |                              |  |  |  |  |  |  |
| Pai  | t 4: Identify Legal Actions, Repossession   | ns, and Foreclosures                  |                     |                      |                              |                              |  |  |  |  |  |  |
| 9.   | Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | <ul><li>■ No</li><li>□ Yes. Fill in the details.</li></ul>  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Case title Case number  | Nature of the case                    | Court or agency     |                      | Status of the                | ne case                      |  |  |  |  |  |  |
| 10.  | Within 1 year before you filed for bankrupte Check all that apply and fill in the details below   |                                       | erty repossessed, f | oreclosed, garnis    | shed, attache                | d, seized, or levied?        |  |  |  |  |  |  |
|  | <ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Creditor Name and Address   | Describe the Property                 |                     | Date                 |                              | Value of the property        |  |  |  |  |  |  |
|  |   | Explain what happened                 | d                   |                      |                              | ргоролту                     |  |  |  |  |  |  |
| 11.  | Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Yes. Fill in the details.   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Creditor Name and Address   | Describe the action the creditor took |                     |                      | Date action was Amount taken |                              |  |  |  |  |  |  |
| 12.  | Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?  No  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | ☐ Yes   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
| Pai  |   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
| 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? |   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | <ul><li>■ No</li><li>□ Yes. Fill in the details for each gift.</li></ul>  |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  | Gifts with a total value of more than \$600 per person  | Describe the gifts                    |                     | Date:                | s you gave<br>lifts          | Value                        |  |  |  |  |  |  |
|  | Person to Whom You Gave the Gift and Address:   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |
|  |   |                                       |                     |                      |                              |                              |  |  |  |  |  |  |

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| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No □ Yes. Fill in the details for each gift or contribution.   |        |   |                |  |                           |  |  |  |  |
|-----|---|--------|---|----------------|--|---------------------------|--|--|--|--|
|     | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)   | tal    | Describe what you contributed   |                | Dates you contributed                    | Value                     |  |  |  |  |
| Par | t 6: List Certain Losses  |        |   |                |  |                           |  |  |  |  |
| 15. | Within 1 year before you filed for bankrup or gambling?   | tcy or | since you filed for bankruptcy, did y   | you lose anytl | ning because of thef                     | t, fire, other disaster,  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |        |   |                |  |                           |  |  |  |  |
|     | how the loss occurred   | nclude | the amount that insurance has paid. List pending the claims on line 33 of Schedule A/B: Property. |                | Date of your loss                        | Value of property<br>lost |  |  |  |  |
| Par | t 7: List Certain Payments or Transfers   |        |   |                |  |                           |  |  |  |  |
| 16. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.  No  Yes. Fill in the details.   |        |   |                |  |                           |  |  |  |  |
|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You   |        | Description and value of any property transferred   |                | Date payment or transfer was made        | Amount of payment         |  |  |  |  |
|     | Law Office of Jason Blust<br>211 W. Wacker<br>Suite 300<br>Chicago, IL 60606  |        | \$1,000.00 attorney fees<br>\$335.00 filing fee<br>\$155.00 expenses                              |                | 2016                                     | \$1,490.00                |  |  |  |  |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  No Yes. Fill in the details.   |        |   |                |  |                           |  |  |  |  |
|     | Yes. Fill in the details.  Person Who Was Paid  Address   |        | Description and value of any prop transferred   | erty           | Date payment or transfer was made        | Amount of payment         |  |  |  |  |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. |        |   |                |  |                           |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |        |   |                |  |                           |  |  |  |  |
|     | Person Who Received Transfer<br>Address   |        | Description and value of property transferred   |                | iny property or received or debts change | Date transfer was made    |  |  |  |  |
|     | Person's relationship to you  |        |   | •              | J  |                           |  |  |  |  |

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Debtor 1 Brenda Ramirez

| 19.  | beneficiary? (These are often called asset-prote  |  | iy property to a  | seir-settie             | a trust or similar device                            | of which you are a                            |
|--|---|--|-------------------|-------------------------|--|---|
|  | Yes. Fill in the details.   |  |                   |                         |  |   |
|  | Name of trust   | Description and  | value of the pro  | perty trans             | sferred  | Date Transfer was made                        |
| Par  | t 8: List of Certain Financial Accounts, Inst   | ruments, Safe Deposi   | t Boxes, and St   | orage Unit              | es   |   |
| 20   | Within 1 year before you filed for bankruptcy,  | were any financial ac  | ecounts or instr  | umante he               | ld in your name, or for y                            | our benefit closed                            |
| 20.  | sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated to bank uptoy, sold moved to bank uptoy. | other financial accou  | nts; certificates | s of deposi             |  |   |
|  | No  |  |                   |                         |  |   |
|  | Yes. Fill in the details.   |  |                   |                         |  |   |
|  |   | Last 4 digits of account number  | Type of acco      | unt or                  | Date account was closed, sold, moved, or transferred | Last balance<br>before closing or<br>transfer |
| 21.  | Do you now have, or did you have within 1 ye cash, or other valuables?  | ear before you filed fo  | r bankruptcy, a   | ny safe de <sub>l</sub> | posit box or other depos                             | itory for securities,                         |
|  | ■ No  |  |                   |                         |  |   |
|  | Yes. Fill in the details.   |  |                   |                         |  |   |
|  | Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code)   | Who else had acc<br>Address (Number, S<br>State and ZIP Code)          |                   | Describe                | the contents   | Do you still have it?                         |
| 00   |   | •  |                   |                         |  | 0   |
| 22.  | Have you stored property in a storage unit or   | place other than you   | r nome within 1   | year beto               | re you filed for bankrupto                           | cy?   |
|  | ■ No □ Yes. Fill in the details.  |  |                   |                         |  |   |
|  | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or<br>to it?<br>Address (Number, S<br>State and ZIP Code) |                   | Describe                | the contents   | Do you still have it?                         |
| Dar  | 4 Or Identify Drenewy Voy Hold or Control for   | r Compone Flor   |                   |                         |  |   |
| Par  | t 9: Identify Property You Hold or Control fo   | or Someone Else  |                   |                         |  |   |
| 23.  | Do you hold or control any property that som for someone.   | eone else owns? Incl   | ude any proper    | ty you bor              | rowed from, are storing f                            | for, or hold in trust                         |
|  | ■ No □ Yes. Fill in the details.  |  |                   |                         |  |   |
|  | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the proj<br>(Number, Street, City, S<br>Code)                 |                   | Describe                | the property   | Value   |
| Par  | t 10: Give Details About Environmental Infor  | mation   |                   |                         |  |   |
| For  | the purpose of Part 10, the following definition  | ns apply:  |                   |                         |  |   |
|  | Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s  | air, land, soil, surfac  | e water, ground   |                         |  |   |
|  | Site means any location, facility, or property a to own, operate, or utilize it, including dispos   | as defined under any   |                   | law, wheth              | er you now own, operate                              | e, or utilize it or used                      |
| Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance hazardous material, pollutant, contaminant, or similar term. |   |  |                   | waste, ha               | zardous substance, toxi                              | c substance,                                  |

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Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Brenda Ramirez

| 24. | Has any governmental unit notified you that you   | may be liable or potentially liable  | under or in violation of an environmo                  | ental law?         |  |  |  |
|-----|---|--|--|--------------------|--|--|--|
|     | ■ No □ Yes. Fill in the details.  |  |  |                    |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit Address (Number, Street, City, State and ZIP Code)       | Environmental law, if you know it                      | Date of notice     |  |  |  |
| 25. | Have you notified any governmental unit of any i  | release of hazardous material?   |  |                    |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |  |  |                    |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code) | Environmental law, if you know it                      | Date of notice     |  |  |  |
| 26. | Have you been a party in any judicial or adminis  | trative proceeding under any envir   | onmental law? Include settlements a                    | and orders.        |  |  |  |
|     | ■ No<br>□ Yes. Fill in the details.   |  |  |                    |  |  |  |
|     | Case Title Case Number  | Court or agency Name Address (Number, Street, City, State and ZIP Code)    | Nature of the case                                     | Status of the case |  |  |  |
| Par | 11: Give Details About Your Business or Conr  | nections to Any Business   |  |                    |  |  |  |
| 27. | Within 4 years before you filed for bankruptcy, d   | id you own a business or have any  | of the following connections to any                    | / business?        |  |  |  |
|     | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time |  |  |                    |  |  |  |
|     | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)                        |  |  |                    |  |  |  |
|     | ☐ A partner in a partnership  |  |  |                    |  |  |  |
|     | ☐ An officer, director, or managing executive of a corporation  |  |  |                    |  |  |  |
|     | ☐ An owner of at least 5% of the voting or equity securities of a corporation                                 |  |  |                    |  |  |  |
|     | No. None of the above applies. Go to Part 12.   |  |  |                    |  |  |  |
|     | Yes. Check all that apply above and fill in the details below for each business.                              |  |  |                    |  |  |  |
|     |   | scribe the nature of the business  | Employer Identification number                         |                    |  |  |  |
|     | Address<br>(Number, Street, City, State and ZIP Code)   | ne of accountant or bookkeeper   | Do not include Social Security  Dates business existed | number or IIIN.    |  |  |  |
| 28. | Within 2 years before you filed for bankruptcy, d institutions, creditors, or other parties.                  | id you give a financial statement to                                       | o anyone about your business? Inclu                    | ude all financial  |  |  |  |
|     | ■ No<br>□ Yes. Fill in the details below.   |  |  |                    |  |  |  |
|     | Name Dat Address (Number, Street, City, State and ZIP Code)   | e Issued   |  |                    |  |  |  |
|     |   |  |  |                    |  |  |  |

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| Part 12: Sign Below |
|---------------------|
|---------------------|

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a hankruptcy case can result in fines up to \$250,000 or imprisonment for up to 30 years or both

| /s/ Br | enda Ramirez                          |   |
|--------|---------------------------------------|---|
|        | da Ramirez<br>Iture of Debtor 1       | Signature of Debtor 2   |
| Date   | September 23, 2016                    | Date  |
| Did yo | u attach additional pages to Your Sta | ntement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? |
| ■ No   |                                       |   |
|        |                                       |   |
| ☐ Yes  | <b>S</b>                              |   |
|        |                                       | s not an attorney to help you fill out bankruptcy forms?                                |
|        |                                       | s not an attorney to help you fill out bankruptcy forms?                                |

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| Fill in this infor  | mation to identify your    | case:                       |                   |  |
|---------------------|----------------------------|-----------------------------|-------------------|--|
| Debtor 1            | Brenda Ramirez             |                             |                   |  |
|                     | First Name                 | Middle Name                 | Last Name         |  |
| Debtor 2            |                            |                             |                   |  |
| (Spouse if, filing) | First Name                 | Middle Name                 | Last Name         |  |
| United States Ba    | ankruptcy Court for the:   | NORTHERN DISTRICT           | OF ILLINOIS       |  |
| Case number         |                            |                             |                   |  |
| (if known)          |                            |                             |                   | ☐ Check if this is an amended filing   |
| Official Fo         |                            | n for Individu              | ıals Filing Under | <b>Chapter 7</b> 12/15   |
|                     | •                          | pter 7, you must fill out t | his form if:      |  |
| creditors have      | e claims secured by yo     | ur property, or             |                   |  |
| you have least      | sed personal property a    | and the lease has not exp   | pired.            |  |
|                     | ever is earlier, unless th |                             |                   | by the date set for the meeting of creditors, d copies to the creditors and lessors you list |

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C? |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                             |   |
| Description of  | Retain the property and enter into a Reaffirmation Agreement.    | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                             |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                               |   |
| Description of  | Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                             |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | ☐ Retain the property and redeem it.                             |   |
| Description of  | Retain the property and enter into a<br>Reaffirmation Agreement. | ☐ Yes   |
| property  | ☐ Retain the property and [explain]:                             |   |
| securing debt:  |  |   |
| Creditor's  | ☐ Surrender the property.  | □ No  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Brenda Ramirez    |   | Case number (if   | Case number (if known)              |  |  |  |
|----------------------------|---|---|-------------------------------------|--|--|--|
|                            |   | _   | <u>_</u>                            |  |  |  |
| name:                      |   | Retain the property and redeem it.  | ☐ Yes                               |  |  |  |
| D                          | <b>.</b>                                    | $\square$ Retain the property and enter into a  |                                     |  |  |  |
| Descript                   |   | Reaffirmation Agreement.  |                                     |  |  |  |
| property                   |   | ☐ Retain the property and [explain]:  |                                     |  |  |  |
| securing                   | debt:                                       |   |                                     |  |  |  |
|                            |   |   |                                     |  |  |  |
|                            | ist Your Unexpired Personal Property        |   |                                     |  |  |  |
|                            |   | ou listed in Schedule G: Executory Contracts and Une  |                                     |  |  |  |
|                            |   | eases. Unexpired leases are leases that are still in effect lease if the trustee does not assume it. 11 U.S.C. § 36 |                                     |  |  |  |
| Tou may as                 | ssume an unexpired personal property        | riease ii the trustee does not assume it. 11 0.3.0. 3 30  | <b>3(μ)(</b> 2).                    |  |  |  |
| Describe y                 | our unexpired personal property leas        | es  | Will the lease be assumed?          |  |  |  |
| Lessor's na                | nmo:  |   | П.,,                                |  |  |  |
| Description                |   |   | □ No                                |  |  |  |
| Property:                  | i oi ieaseu                                 |   | ☐ Yes                               |  |  |  |
|                            |   |   | □ res                               |  |  |  |
| Lessor's na                | ame:  |   | □ No                                |  |  |  |
| Description                | of leased                                   |   |                                     |  |  |  |
| Property:                  |   |   | ☐ Yes                               |  |  |  |
| Lessor's na                | nme.  |   | □ No                                |  |  |  |
| Description                |   |   | □ NO                                |  |  |  |
| Property:                  | 101100000                                   |   | ☐ Yes                               |  |  |  |
| -17                        |   |   | L les                               |  |  |  |
| Lessor's na                | ame:  |   | □ No                                |  |  |  |
| Description                | of leased                                   |   |                                     |  |  |  |
| Property:                  |   |   | ☐ Yes                               |  |  |  |
| Lessor's na                | ame:  |   | □ No                                |  |  |  |
| Description                | of leased                                   |   |                                     |  |  |  |
| Property:                  |   |   | ☐ Yes                               |  |  |  |
| Lessor's na                | ame.  |   | □ No                                |  |  |  |
| Description                |   |   | □ No                                |  |  |  |
| Property:                  |   |   | ☐ Yes                               |  |  |  |
|                            |   |   | _                                   |  |  |  |
| Lessor's na<br>Description |   |   | □ No                                |  |  |  |
| Property:                  | 1 01 104004                                 |   | ☐ Yes                               |  |  |  |
| D 10                       |   |   |                                     |  |  |  |
| Part 3:                    | Sign Below                                  |   |                                     |  |  |  |
| l lador nonc               | alter of marity and declare that I have ind | icated my intention about any property of my estate th  | at accuracy a daht and any narranal |  |  |  |
| property th                | at is subject to an unexpired lease.        | icated my intention about any property of my estate th  | iat secures a debt and any personal |  |  |  |
| <b>X</b> /s/ Br            | enda Ramirez                                | X   |                                     |  |  |  |
|                            | da Ramirez                                  | Signature of Debtor 2   |                                     |  |  |  |
|                            | ture of Debtor 1                            | g   |                                     |  |  |  |
| 3.10                       |   |   |                                     |  |  |  |
| Date                       | September 23, 2016                          | Date  |                                     |  |  |  |
|                            |   |   |                                     |  |  |  |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-30353 Doc 1 Filed 09/23/16 Entered 09/23/16 13:47:40 Desc Main Document Page 46 of 54

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

| In re | re Brenda Ramirez  |   | Case No.  |                                      |  |  |
|-------|--|---|---|--------------------------------------|--|--|
|       |  | Debtor(s)   | Chapter   | 7                                    |  |  |
|       | DISCLOSURE OF COMPENSA   | ATION OF ATTO   | RNEY FOR DI   | EBTOR(S)                             |  |  |
| 1.    | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in  | the petition in bankruptcy,   | , or agreed to be paid                                    | to me, for services rendered or to   |  |  |
|       | For legal services, I have agreed to accept  |   | <b>\$</b>   | 1,000.00                             |  |  |
|       | Prior to the filing of this statement I have received  |   |   | 1,000.00                             |  |  |
|       | Balance Due  |   |   | 0.00                                 |  |  |
| 2.    | The source of the compensation paid to me was:   |   |   |                                      |  |  |
|       | ■ Debtor □ Other (specify):  |   |   |                                      |  |  |
| 3.    | The source of compensation to be paid to me is:  |   |   |                                      |  |  |
|       | ■ Debtor □ Other (specify):  |   |   |                                      |  |  |
| 4.    | ■ I have not agreed to share the above-disclosed compensat   | tion with any other person  | unless they are mem                                       | abers and associates of my law firm. |  |  |
|       | ☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names o   |   |   |                                      |  |  |
| 5.    | In return for the above-disclosed fee, I have agreed to render   | legal service for all aspect  | ts of the bankruptcy                                      | case, including:                     |  |  |
|       | <ul> <li>a. Analysis of the debtor's financial situation, and rendering a</li> <li>b. Preparation and filing of any petition, schedules, statemen</li> <li>c. Representation of the debtor at the meeting of creditors an</li> <li>d. Representation of the debtor in adversary proceedings and</li> <li>e. [Other provisions as needed]</li> <li>In Chapter 13 cases, the Court-Approved Reten</li> </ul> | nt of affairs and plan which<br>nd confirmation hearing, and<br>d other contested bankrupto             | h may be required;<br>nd any adjourned hea<br>cy matters; | arings thereof;                      |  |  |
| 6.    | By agreement with the debtor(s), the above-disclosed fee does  | s not include the following   | g service:  |                                      |  |  |
|       | CI   | ERTIFICATION  |   |                                      |  |  |
|       | I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.  |   |   |                                      |  |  |
| _     | September 23, 2016  Date   | Jason Blust, Law Of Signature of Attorne Law Office of Jaso 211 W Wacker Dri Ste. 300 Chicago, IL 60606 | on Blust<br>ive   | st #6276382                          |  |  |

### LAW OFFICE OF JASON BLUST, LLC

#### CONTRACT FOR BANKRUPTCY SERVICES

| CONTRACT FOR BANKRUPTCY SERVICES   |  |   |  |  |
|--|--|---|--|--|
| UNSECURED & SECURED DEBTS  | NON-DISCHARGEABLE DEBTS STUDENT LOANS  |   |  |  |
| ESTIMATED UNSECURED DEBT 10,000  |  |   |  |  |
| ESTIMATED FAIR MARKET VALUE OF HOME  |  | 800   |  |  |
| ESTIMATED MORTGAGES ON HOME  |  | PORT  |  |  |
| ESTIMATED CAR LIEN #1  |  |   |  |  |
| ESTIMATED CAR LIEN #2  |  | S   |  |  |
| ESTIMATED OTHER SECURED DEBT   | OTHER  |   |  |  |
| NOTICE: This Agreement contains provisions requiring arbitration of fee disputes. Before you sign the agreement you should consider consulting with another lawyer about the advisability of making an agreement with mandatory arbitration requirements. Arbitration proceedings are ways to resolve disputes without the use of the court system. By entering into agreements that require arbitration as the way to resolve fee disputes, you give up your right to go to court to resolve these disputes by a judge or jury. These are important rights that should not be given up without careful consideration.  I. PARTIES & PURPOSE: This is an agreement for legal services entered into on the date shown below between Law Office of Jason Blust, LLC, or one of its wholly owned subsidiaries (hereinafter "JB") and the individual (or married couple) assigned to the record number indicated below (hereinafter "Client") relating to legal services in relation to bankruptcy and debt relief. The contract is solely between JB, any assigns, heirs, or related entities that may be formed in the future and not any individual, partner, member or employee of JB. JB is a debt relief agency and law firm that files bankruptcy cases on behalf of its clients.  II. CLIENT OBLIGATIONS: JB reserves the right to withdraw or terminate the representation in the event Client does not meet his/her obligations. |  |   |  |  |
| Active Participation and Communication: Client agrees to actively participate the duration of the bankruptcy case. This includes immediately providing updated countries on this Contract shall be authorization for JB to file a bankruptcy pet electronic filing system and all other subsequent filings through the Bankruptcy receive documents and/or correspondence from JB via either email or first class any reasonable time in JB's sole discretion via email, text message, telephone, Payment of Attorney Fees and Costs/Arbitration: Client agrees to pay all attorney manner and that fees and costs, as disclosed must be paid before the carepresents Client and Client controls the representation even if the fee is paid if resolve fee disputes via Arbitration (see Section IV).  | e and communica<br>ated contact info<br>g dates or foreclo<br>ition for Client vi<br>y Court's electron<br>ss mail. Client ag<br>or postal mail.<br>orney fees and co<br>ase is filed with the | te with any and all JB staff during armation and any changes to sure sale notices. Client's a the Bankruptcy Court's nic filing system. Client agrees to rees that JB can contact Client at assess as disclosed herein in a ne bankruptcy court. JB only JB and Client expressly agree to |  |  |
| The "flat fee" for representation in a Chapter 7 case is \$  |  |   |  |  |

bankruptcy clerk's office. Client acknowledges that Client will not have the protection of the Automatic Stay in Bankruptcy pursuant to 11 U.S.C. §362 until the bankruptcy case is filed. There may be additional fees charged by JB for delays caused by

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the Client, including Client's failure to pay fees in a timely manner, and failure to timely provide information and/or paperwork. Client expressly agrees that funds paid will be deposited in JB's operating account and are the property of JB. The "flat fee" for representation in the Chapter 13 case is \$\_\_\_\_\_\_ plus costs. JB agrees to file the client's Chapter 13 case with the court for the payment of \$\_\_\_\_\_ and will accept the balance from Client's Chapter 13 payments. Any estimated chapter 13 monthly payment is subject to change and JB does not guarantee a particular chapter 13 payment. Costs include not only filing fee and other third party services, but also copying charges, bank transaction fee, credit card interchange fees, express mail, postage, etc. In addition, there is a court filing fee totaling  $\$ (subject to change without notice) and optional document retrieval and financial counseling facilitation totaling \$ 155 (subject to change without notice). Client expressly agrees that chapter 7 and chapter 13 fees paid are an advance payment retainer and not a security retainer and such arrangement is an express condition of JB's willingness to handle the case. An advance payment retainer is appropriate because work is being performed from the moment the firm is hired and continues through the relationship, even if a case is never filed with the court. In Chapter 13, the fixed flat fees and advance payment retainer are for pre-filing and preconfirmation work. All fees paid are the property of the attorney and will be deposited into JB's operating account and are earned upon receipt, subject to refund only as provided in Section IV, Though the fee is fixed, in chapter 13's JB may apply to the court for additional fees, paid through the chapter 13 plan if there are extraordinary circumstances, such as extensive evidentiary hears, contested adversary proceedings, or appeals. See Section III for further details. Advance payment of costs may be held in a safe deposit box, a locked safe, a trust account, or any other secure place in JB's sole discretion until incurred and used to reimburse JB for payment. KC Client's Initials.

Dishonored Payments incur a fee of \$35 ± any additional fees and costs incurred by JB as a result of dishonored or stopped payments. Failure to pay can result in JB closing the file and terminating the attorney-client relationship (see Section IV). In the event Client's chapter 13 is dismissed prior to full payment of attorney fees. Client agrees and expressly authorizes the chapter 13 trustee to pay any money held to JB for payment of the balance owed. Client agrees that JB may retain counsel to collect any balances due and will be responsible for payment of any reasonable collection costs and fees, not less than \$400. Client authorizes the collection of any additional fees from the chapter 13 trustee (if applicable). Client expressly agrees that fees tendered to JB by personal check may be converted and processed as ACH transaction. JB agrees to pursue third parties who may be liable for payment of fees, but failure of JB to collect from third parties does not relieve client of responsibility for payment. Client agrees that non-basis services are billed at the firms' customary hourly rate as described in Section IV. Billable (see Section III).

Full Disclosure: Client agrees to truthfully, completely and accurately disclose all assets and their value, liability and their balances, income and expenses to JB any on any and all bankruptcy paperwork. In addition, Client agrees to accurately answer any and all questions posed by JB and/or a representative or agent of the United States Trustee or as otherwise provided by law.

Provide Documentation and Follow Instructions: Client agrees to provide copies of any and all documentation requested by JB in a timely and organized manner. Client expressly acknowledges and agrees that JB has duties to the Court that require JB to reasonably seek documentary evidence that supports Clients' factual contentions before JB can sign off and file bankruptcy paperwork with the court. Such documentation includes, but is not limited to: pay advices for the six month time period before the filing of the bankruptcy case (client acknowledges that since the case is not filed immediately upon and signing of this contract that the six month time period changes as time passes), tax returns, property appraisals, recorded deeds (if applicable), recorded mortgages (if applicable), non-filing spouse's (or household member's) pay advices, and any other relevant information directly or indirectly related to the Client's financial condition. Client further agrees that he/she will read and follow all instructions provided to Client and incorporated by reference and made a part of this Contract for services.

#### III. LAW FIRM OBLIGATIONS:

Use Best Efforts: In consideration of Client's obligations as stated in Section III, JB agrees to use its best efforts to obtain a satisfactory result for Client by providing basic legal services in connection with a bankruptcy case on an efficient and cost-effective basis. Client expressly agrees that JB makes no guarantee regarding the outcome of the bankruptcy case, including but not limited to: ability and qualification for filing chapter 7 or chapter 13 bankruptcies, successful discharge of any particular debt, the amount of a chapter 13 plan payment, and/or whether or not JB can successfully reduce the balance of secured liens. JB offers its financial situation, and/or facts as revealed after review of documentation that could affect in any way any advice JB gives Client.

Staffing: JB structures its practice as a group practice. JB does not guarantee any minimum level of participation in a case by any individual employee, member, attorney, paralegal, or partner of the firm. Multiple attorneys and staff may work on various aspects of the case as assigned by JB in its sole discretion in compliance with all applicable rules of professional conduct. JB expects to perform the bulk of the work, but reserves the right to utilize other attorneys, paralegals, and litigation/clerical assistants where appropriate. In addition, Client authorizes JB, at its discretion, to have attorneys within the firm, or outside counsel, review Client's file to explore other potential causes of action client may have.

Provide Basic Bankruptcy Services: JB, in consideration for Client's obligations as stated in Section III, agrees to provide basis legal services as required to file either a Chapter 7 or Chapter 13 Bankruptcy case, the Chapter determined as mutually agreed and indicated below. Basic legal services include, but are not limited to: pre-filing verification of bankruptcy representation, post-filing and pre-discharge contract with creditors, pre-filing advice and counsel to Client, advice during the case concerning the nature and effect of the applicable bankruptcy rules, including a reasonable amount of telephone calls and/or in-person meetings, exemption advice and planning; preparation and filing of a bankruptcy petition, preparation and filing of schedules and statements as required by bankruptcy statutes, rules, local rules, and any applicable standing orders of courts of competent jurisdiction, representation at the meeting of creditors pursuant to §341 of the Bankruptcy Code, representation at any submitting information hearings pursuant to §1324 (if applicable), setting valuation disputes prior to confirmation in Chapter 13, requested by the United States Trustee, negotiation and counsel in relation to reaffirmation agreements pursuant to 11 U.S.C. VIII, if applicable. Client expressly agrees that in Chapter 7, JB will not file the bankruptcy petition and schedules with the court until all fees and costs have been paid in full. In addition, JB will not file the bankruptcy cases with the court until all required documentation has been provided; all required documents are timely signed, reviewed, and verified, unless alternative

Client further agrees that the above-described fees cover basic services only. There may be additional fees for non-basic services in addition to those disclosed above. Subject to the applicability of any local rules, standing orders, or additional contracts, non-basic services for which additional fees may apply include, but are not limited to: Adversary proceedings pursuant to 11 U.S.C. §523 or §727; excessive phone calls or in-person consultations; motions to dismiss for client's failure to use the artificial court hearings or failure to provide requested documentation; action to enforce the automatic stay pursuant to 11 U.S.C. §362; actions to enforce the discharge injunction; Rule 2004 Examinations; depositions; interrogatories or other discovery proceedings; contested objections to confirmation of a Chapter 13 plan; amended creditor schedules (typically \$150 in chapter 7 + \$30 filling fee in all chapters, subject to change); amended asset and/or income/expense schedules due to management courses; post-discharge services; appraisal services; facilitation of credit counseling and/or financial Client's failure to appear at a scheduled meeting (typically \$150 in chapter 7); motions to avoid liens (typically \$260 per motion); proceedings to strip mortgages when applicable; and motions for redemption pursuant to 11 U.S.C. §722 (typically conversion of a case from one chapter to another (requires an additional in-person meeting and results in additional reasonable fees and costs as mutually agreed); and/or proceedings to reopen a closed case for any reason.

IV. TERMINATION OF SERVICES (Refund Policy): The parties may terminate services at any time. Termination of services by Client must be in writing. JB may terminate services for failure of Client to fulfill any of Client's contractual obligations as identified in Section II of this agreement. In either event, Client may be entitled to a refund of part of the nonrefundable fee

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based upon quantum meruit. The factors considered include: time spent, including time spent answering telephone calls, processing, organizing and responding to any correspondence; case status; case progress; and the amount of work remaining to complete the case. Analysis of time is calculated in tenths of an hour increments, rounded up to the next tenth of an hour. Attorney time is worth \$250-\$450 per hour depending on the experience of the attorney performing the service. Non-attorney professional time is worth \$75 per hour. Hourly rates are subject to periodic review and revision at JB's sole discretion. JB will also consider the progress of the case when determining a reasonable refund. It is impossible to determine a fair refund until a detailed analysis is performed on a case-by-case basis. Refunds, if any, will be sent to Client at Client's last known address within a reasonable amount of time. In the event Client is deceased or incapacitated, or if the fee was paid by a third party, refunds, if any, are the property of the Client and will only be released to the Client or an authorized representative of the Client's estate. In the event Client terminates services after a bankruptcy case has been filed, JB is given a reasonable time to file withdrawal and/or substitution of counsel documents with the clerk of court. JB expressly reserves the right to enforce a previous award of fees and to seek payment of any outstanding balance of legal fees. The parties expressly agree that JB's representation automatically terminates upon the closing of the case by the Clerk of Court. Client expressly agrees that JB is authorized to contact Client in the future, even after the conclusion of the case via mail, telephone, electronic mail or text message regarding any future JB products and/or services.

V. LIMITED POWER OF ATTORNEY: Client expressly agrees that signature on this contract grants JB a Limited Power of Attorney for the purposes of carrying out the bankruptcy representation. Such power includes, but is not limited to, the power to obtain Client's tax returns or transcripts from either the IRS or any person or entity consulted in regards to tax preparation; the ability to obtain information and discuss Client's situation with any of Client's secured creditors; and in the event the bankruptcy is dismissed or converted prior to completion, JB may apply funds on hand with the Chapter 13 trustee that would otherwise be forwarded to Client towards the balance owed to JB, if any, and/or the Chapter 7 fee, if applicable, by granting JB trustee and applied.

VI. RETENTION AND DISPOSITION OF RECORDS: JB will retain records as required by applicable law in your state, generally at least (5) years. JB, reserves the right to store records electronically. JB encourages Client to keep and maintain copies of all bankruptcy related matters. Client may request a copy of the file by sending a written request. JB reserves the right to charge a reasonable retrieval and duplication fee of at least \$35.

VII. RECEIPT OF MANDATORY NOTICE AND DISCLOSURE: The Bankruptcy Abuse and Prevention and Consumer Protection Act of 2005 require JB to provide mandatory notices/disclosures to Client. Your signature on this contract is an acknowledgment that Client has received, read and understood the two(2) separate documents entitled "§525(a) Notice", and "Important Information About Bankruptcy Assistance Services From an Attorney or bankruptcy Petition Preparer."

VII. ENTIRE AGREEMENT: The entire contract between the Parties is contained in this instrument. Parties agree to all of the terms and conditions set forth herein and acknowledge that they have read and understand this Agreement. In the event Client is filing a case in a jurisdiction where the local bankruptcy court has adopted any rule procedure or general order regarding the relationship between the Attorney and the Client, then such rule, procedure, Court Order, "Rights & Responsibilities Agreement," or "Model Retention Agreement" and its corresponding rights and obligations is specifically incorporated by its terms which supersede and control all provisions of this contract. Client signature on this document serves as an Responsibilities Agreement by Client that client has been informed of such a rule, procedure, Order "Rights and conditions. In the event provisions of this Agreement' and has agreed to be bound by its additional terms and "Rights & Responsibilities Agreement," and/or "Model Retention Agreement" the provisions in any Rule, Procedure, Court Order, Order, "Rights & Responsibilities Agreement," or "Model Retention Agreement" the provisions of the Rules, Procedure, Court Order, "Rights & Responsibilities Agreement," or "Model Retention Agreement" would control.

IX. BINDING ARBITRATION: In the event of any controversy, claim or dispute between the parties arising out of or relating to this agreement or the breach, termination, enforcement, interpretation, unconscionability or validity thereof, including the termination of the scope or applicability of this agreement to arbitrate, shall be determined by arbitration in the county and state in which the consumer resides at the time of the agreement in accordance with the laws of the state of consumer's

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residence at the time of the agreement or agreements to be made in and to be performed in the state of the consumer's residence. The parties agree, the arbitration shall be administered by the American Arbitration Association ("AAA") pursuant to its rules and procedures and an arbitrator shall be selected by the AAA. The arbitrator shall be neutral and independent and shall comply with the AAA code of ethics. The award rendered by the arbitrator shall be final and shall not be subject to vacation or modification. Judgment on the award made by the arbitrator may be entered in any court having jurisdiction over the parties. If either party fails to comply with the arbitrator's award, the injured party may petition the circuit court for enforcement. The parties agree that either party may bring claims against the other only in his/her or its individual capacity and not as a plaintiff or class member in any purported class or representative proceeding. Further, the parties agree that the arbitrator may not consolidate proceedings of more than one person's claims, and may not otherwise preside over any form of representative or class proceeding. The parties shall share the cost of arbitration, including attorney's fees, equally. If the consumer's share of the cost is greater that \$1,000.00 (One-thousand dollars), JB will pay the consumer's share of costs in excess of that amount. In the event a party fails to proceed with arbitration, unsuccessfully challenges the arbitrator's award, or fails to comply with the arbitrator's award, the other party is entitled to costs of suit, including a reasonable attorney's fee for having to compel arbitration or defend or enforce the award. Binding Arbitration means that both parties give up the right to a trial by jury. It also means that both parties give up the right to appeal from the arbitrator's ruling except for a narrow range of issues that can or may be appealed. It also means that discovery may be severely limited by the arbitrator. This section and arbitration requirement shall survive any termination.

X. SEVERABILITY: In the event any provision of this agreement is found to be unenforceable for any reason by a court of competent jurisdiction, only the offending clause shall be stricken from the agreement and the remainder of the agreement shall remain in full force and effect.

I/We hereby agree to and acknowledge all of the terms above and I/we retain and authorize JB to file a bankruptcy on my/our behalf:

CHAPTER 7 CHAPTER 13 (circle one)

RECORD # S 11777

X BUILD Parks

Debtor

Debtor

DATE

DATE

Joint Debtor

#### **United States Bankruptcy Court** Northern District of Illinois

| In re | Brenda Ramirez  |   | Case No.               |  |  |
|-------|---|---|------------------------|--|--|
|       |   | Debtor(s)   | Chapter 7              |  |  |
|       | VERIFICATION OF CREDITOR MATRIX   |   |                        |  |  |
|       |   | Number of 6   | Number of Creditors:15 |  |  |
|       | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. |   |                        |  |  |
| Date: | September 23, 2016  | /s/ Brenda Ramirez Brenda Ramirez Signature of Debtor |                        |  |  |

Capital One Po Box 30285 Salt Lake City, UT 84130

Citibank/Best Buy Centalized Bankruptcy/Citicorp Credit Se Po Box 790040 Sanit Louis, MO 63179

City of Chicago Bureau of Parking 333 S State St, Room 540 Chicago, IL 60604

Comenity Bank/Express Po Box 18215 Columbus, OH 43218

Comenity Bank/mandee Po Box 182125 Columbus, OH 43218

Comenity Bank/Victoria Secret Po Box 18215 Columbus, OH 43218

Credit One Bank Na Po Box 98873 Las Vegas, NV 89193

ERC/Enhanced Recovery Corp 8014 Bayberry Rd Jacksonville, FL 32256

Fingerhut 6250 Ridgewood Rd St Cloud, MN 56303

Fst Premier 601 S Minneapolis Ave Sioux Falls, SD 57104

Genesis Bankcard Srvs 15220 Nw Greenbrier Pkwy Ste 200 Beaverton, OR 97006 Mabt/contfin Pob 8099 Newark, DE 19714

Merrick Bank/Geico Card Po Box 23356 Pittsburg, PA 15222

Mid Am B&T Credit Card Po Box 68 Ralla, MO 65402

PLS Loan Store 3164 175th St. Hazel Crest, IL 60429